

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF OHIO
EASTERN DIVISION

~~~~~

IN RE: NATIONAL PRESCRIPTION MDL No. 2804  
OPIATE LITIGATION

Case No.  
17-md-2804

Judge Dan Aaron  
Polster

This document relates to:  
The County of Summit, Ohio, et al. v. Purdue  
Pharma L.P., et al., Case No. 18-OP-45090

~~~~~

Videotaped Deposition of
GRETA JOHNSON, 30(b)(6)

January 15, 2019
8:30 a.m.

Taken at:

Sheraton Suites Akron
1989 Front Street - Portage Room
Cuyahoga Falls, Ohio

Stephen J. DeBacco, RPR

<p style="text-align: right;">Page 2</p> <p>1 APPEARANCES:</p> <p>2</p> <p>3 On behalf of the City of Akron, Summit</p> <p>4 County, and the Witness:</p> <p>5 Motley Rice LLC, by</p> <p>6 ANNE MCGINNESS KEARSE, ESQ.</p> <p>7 JODI WESTBROOK FLOWERS, ESQ.</p> <p>8 ANNIE E. KOUBA, ESQ.</p> <p>9 DANIELLE M. SALERNO, ESQ.</p> <p>10 28 Bridgeside Boulevard</p> <p>11 Mt. Pleasant, South Carolina 29464</p> <p>12 (843) 216-9140</p> <p>13 akearse@motleyrice.com</p> <p>14 (843) 216-9163</p> <p>15 jflowers@motleyrice.com</p> <p>16 (843) 216-9225</p> <p>17 akouba@motleyrice.com</p> <p>18 (843) 216-9461</p> <p>19 dsalerno@motleyrice.com</p> <p>20</p> <p>21 On behalf of Walmart, Inc.:</p> <p>22</p> <p>23 Jones Day, by:</p> <p>24 CHRISTOPHER M. LOMAX, ESQ.</p> <p>25 Brickell World Plaza</p> <p>600 Brickell Avenue, Suite 3300</p> <p>Miami, Florida 33131</p> <p>(305) 714-9719</p> <p>clomax@jonesday.com</p> <p>On behalf of Cardinal Health:</p> <p>Williams & Connolly LLP, by</p> <p>WILL F. HAWKINS, ESQ.</p> <p>725 Twelfth Street Northwest</p> <p>Washington, D.C. 20005</p> <p>(202) 434-5172</p> <p>whawkins@wc.com</p> <p>~~~~~</p>	<p style="text-align: right;">Page 4</p> <p>1 APPEARANCES, Continued:</p> <p>2</p> <p>3 On behalf of McKesson Corporation:</p> <p>4 Covington & Burling LLP, by</p> <p>5 SONYA D. WINNER, ESQ.</p> <p>6 One Front Street</p> <p>7 San Francisco, California 94111-5356</p> <p>8 (415) 591-7072</p> <p>9 swinner@cov.com</p> <p>10 Covington & Burling LLP, by</p> <p>11 STEPHEN F. RAIOLA, ESQ.</p> <p>12 One CityCenter</p> <p>13 850 Tenth Street Northwest</p> <p>14 Washington D.C., 20001-4956</p> <p>15 (202) 662-5786</p> <p>16 sraiola@cov.com</p> <p>17</p> <p>18 On behalf of Endo Health Solutions, Inc.,</p> <p>19 and Endo Pharmaceuticals, Inc., via</p> <p>20 telephone:</p> <p>21 Baker Hostetler, by</p> <p>22 CAROLE S. RENDON, ESQ.</p> <p>23 TERA N. COLEMAN, ESQ.</p> <p>24 Key Tower</p> <p>25 127 Public Square, Suite 2000</p> <p>Cleveland, Ohio 44114-1214</p> <p>(216) 861-7420</p> <p>crendon@bakerlaw.com</p> <p>(216) 861-7582</p> <p>tcoleman@bakerlaw.com</p> <p>On behalf of AmerisourceBergen Drug</p> <p>Corporation, via telephone:</p> <p>Jackson Kelly PLLC, by</p> <p>JAMES D. JOHNSON, ESQ.</p> <p>221 Northwest Fifth Street</p> <p>Evansville, Indiana 47708</p> <p>(812) 422-9444</p> <p>jdjohnson@jacksonkelly.com</p> <p>~~~~~</p>
<p style="text-align: right;">Page 3</p> <p>1 APPEARANCES, Continued:</p> <p>2</p> <p>3 On behalf of Johnson & Johnson and</p> <p>4 Janssen Pharmaceuticals, Inc.:</p> <p>5 Tucker Ellis, LLP, by</p> <p>6 ZACHARY J. ADAMS, ESQ.</p> <p>7 950 North Main Avenue, Suite 1100</p> <p>8 Cleveland, Ohio 44113-7213</p> <p>9 (216) 696-5474</p> <p>10 zachary.adams@tuckerellis.com</p> <p>11</p> <p>12 On behalf of Rite Aid:</p> <p>13 Morgan, Lewis & Bockius LLP, by</p> <p>14 SCOTT T. SCHUTTE, ESQ.</p> <p>15 77 West Wacker Drive</p> <p>16 Chicago, Illinois 60601-5094</p> <p>17 (312) 324-1773</p> <p>18 scott.schutte@morganlewis.com</p> <p>19</p> <p>20 On behalf of Cephalon, Inc.; Teva</p> <p>21 Pharmaceuticals USA, Inc.; Actavis, LLC;</p> <p>22 Actavis Pharma, Inc. f/k/a Watson Pharma,</p> <p>23 Inc.; and Watson Laboratories, Inc.:</p> <p>24</p> <p>25 Morgan, Lewis & Bockius LLP, by</p> <p>WENDY WEST FEINSTEIN, ESQ.</p> <p>One Oxford Centre, 32nd Floor</p> <p>Pittsburgh, Pennsylvania 15219-6401</p> <p>(412) 560-7455</p> <p>wendy.feinstein@morganlewis.com</p> <p>~~~~~</p>	<p style="text-align: right;">Page 5</p> <p>1 APPEARANCES, Continued:</p> <p>2</p> <p>3 On behalf of Cephalon, Inc.; Teva</p> <p>4 Pharmaceuticals USA, Inc.; Actavis, LLC;</p> <p>5 Actavis Pharma, Inc. f/k/a Watson Pharma,</p> <p>6 Inc.; and Watson Laboratories, Inc., via</p> <p>7 telephone:</p> <p>8</p> <p>9 Morgan, Lewis & Bockius LLP, by</p> <p>10 LATIERA RAYFORD, ESQ.</p> <p>11 77 West Wacker Drive</p> <p>12 Chicago, Illinois 60601-5094</p> <p>13 (312) 324-1481</p> <p>14 latiera.rayford@morganlewis.com</p> <p>15</p> <p>16 ALSO PRESENT:</p> <p>17 Randy Andrews, Legal Videographer</p> <p>18 ~~~~~</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>

<p style="text-align: right;">Page 6</p> <p>1 TRANSCRIPT INDEX</p> <p>2</p> <p>3 APPEARANCES..... 2</p> <p>4</p> <p>5 INDEX OF EXHIBITS 7</p> <p>6</p> <p>7 EXAMINATION OF GRETA JOHNSON</p> <p>8 By Ms. Winner..... 17</p> <p>9 By Ms. Feinstein..... 266</p> <p>10 By Mr. Schutte..... 398</p> <p>11</p> <p>12 REPORTER'S CERTIFICATE..... 458</p> <p>13</p> <p>14 EXHIBIT CUSTODY</p> <p>15 EXHIBITS RETAINED BY THE COURT REPORTER</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 8</p> <p>1 Exhibit 8 Summit County and City of 136</p> <p>2 Akron, Ohio Plaintiff First</p> <p>3 Amended Responses and</p> <p>4 Objections to Distributor</p> <p>5 Defendants' First Set of</p> <p>6 Interrogatories</p> <p>7 Exhibit 9 12/12/2018 Letter from Atty .. 182</p> <p>8 Anne Kearse to Atty Sara</p> <p>9 Roitman</p> <p>10 Exhibit 10 Summit County and the City ... 263</p> <p>11 of Akron, Ohio's Amended</p> <p>12 Responses and Objections to</p> <p>13 the Manufacturer Defendants'</p> <p>14 First Set of Interrogatories</p> <p>15 and the National Retail</p> <p>16 Pharmacy Defendants' First</p> <p>17 Set of Interrogatories Re:</p> <p>18 30(b)(6) Topics</p> <p>19 Exhibit 11 Plaintiffs The City of 264</p> <p>20 Cleveland, County of</p> <p>21 Cuyahoga, County of Summit</p> <p>22 and City of Akron's</p> <p>23 Supplemental Amended</p> <p>24 Responses and</p> <p>25 Objections to the</p> <p>Manufacturer Defendant's</p> <p>First Set of</p> <p>Interrogatories, Submitted</p> <p>Pursuant to Discovery Ruling</p> <p>No. 13</p> <p>Exhibit 12 Spreadsheet Titled 264</p> <p>"Confidential Protected</p> <p>Health Information -</p> <p>Produced Under a Protective</p> <p>Order - Attorneys' Eyes Only</p> <p>Exhibit 13 Spreadsheet Titled 265</p> <p>"Confidential Protected</p> <p>Health Information -</p> <p>Produced Under a Protective</p> <p>Order - Attorneys' Eyes Only</p> <p>23</p> <p>24</p> <p>25</p>
<p style="text-align: right;">Page 7</p> <p>1 INDEX OF EXHIBITS</p> <p>2 NUMBER DESCRIPTION MARKED</p> <p>3 Exhibit 1 Second Amended Notice of 22</p> <p>4 Videotaped 30(b)(6)</p> <p>5 Deposition of the County of</p> <p>6 Summit</p> <p>7 Exhibit 2 Document Titled, "Drug 47</p> <p>8 Thread Assessment, Summit</p> <p>9 County, Ohio,"</p> <p>10 SUMMIT_000023567 to</p> <p>11 000023648</p> <p>12 Exhibit 3 Document Titled "Ohio Office . 61</p> <p>13 of Criminal Justice Services</p> <p>14 2016 Semi-Annual Performance</p> <p>15 Report," SUMMIT000020314 to</p> <p>16 000020323</p> <p>17 Exhibit 4 10/6/2014 E-Mail Chain Re: ... 67</p> <p>18 2015 National Drug Threat</p> <p>19 Survey, with Attachments,</p> <p>20 SUMMIT_000072535 to</p> <p>21 000072541</p> <p>22 Exhibit 5 1/25/2006 Media Release, 88</p> <p>23 "Heroin Users Face</p> <p>24 Potentially Fatal</p> <p>25 Ingredient,"</p> <p>SUMMIT_000350711 to</p> <p>000350712</p> <p>Exhibit 6 Summit County and City of 118</p> <p>Akron, Ohio Plaintiff's</p> <p>Supplemental Responses and</p> <p>Objections to Distributor</p> <p>Defendants' Interrogatory</p> <p>Number 3 As Rewritten by</p> <p>Special Master David Cohen</p> <p>Exhibit 7 Summit County and City of 128</p> <p>Akron, Ohio Plaintiff's</p> <p>First Amended Responses and</p> <p>Objections to Distributor</p> <p>Defendants' Third Set of</p> <p>Interrogatories</p>	<p style="text-align: right;">Page 9</p> <p>1 Exhibit 14 1/8/2019 Letter from Atty 265</p> <p>2 Linda Singer to Special</p> <p>3 Master David Cohen Re:</p> <p>4 Plaintiffs' Response to</p> <p>5 Manufacturer Defendants'</p> <p>6 Renewed Motion to Compel</p> <p>7 Immediate and Full</p> <p>8 Compliance with Discovery</p> <p>9 Ruling Nos. 5 and 13</p> <p>10 Exhibit 15 Spreadsheet Titled 265</p> <p>11 "Confidential Protected</p> <p>12 Health Information -</p> <p>13 Produced Under a Protective</p> <p>14 Order - Attorneys' Eyes Only</p> <p>15 Exhibit 16 Spreadsheet Titled 266</p> <p>16 "Confidential Protected</p> <p>17 Health Information"</p> <p>18 Exhibit 17 Document Listing Names and ... 266</p> <p>19 Dates of Summit County</p> <p>20 Overdose Deaths</p> <p>21 Exhibit 18 10/1/2010 Document Titled 378</p> <p>22 "Ohio Prescription Drug</p> <p>23 Abuse Task Force: Final</p> <p>24 Report Task Force</p> <p>25 Recommendations</p> <p>Exhibit 19 Document Titled "Joint 385</p> <p>Commission on Accreditation</p> <p>of Healthcare Organizations</p> <p>Pain Standards for 2001,"</p> <p>PPLPC019001392359 to</p> <p>019001392374</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>

<p style="text-align: right;">Page 10</p> <p>1 INDEX OF VIDEO OBJECTION</p> <p>2 OBJECT PAGE</p> <p>3 objection..... 36</p> <p>objection..... 40</p> <p>4 object..... 41</p> <p>object..... 49</p> <p>5 object..... 56</p> <p>object..... 59</p> <p>6 object..... 71</p> <p>object..... 72</p> <p>7 object..... 77</p> <p>object..... 78</p> <p>8 object..... 79</p> <p>object..... 80</p> <p>9 object..... 80</p> <p>object..... 81</p> <p>10 object..... 81</p> <p>object..... 84</p> <p>11 object..... 87</p> <p>object..... 92</p> <p>12 object..... 92</p> <p>object..... 92</p> <p>13 object..... 94</p> <p>object..... 95</p> <p>14 object..... 97</p> <p>object..... 98</p> <p>15 object..... 104</p> <p>object..... 105</p> <p>16 object..... 106</p> <p>object..... 106</p> <p>17 object..... 107</p> <p>object..... 108</p> <p>18 object..... 109</p> <p>object..... 109</p> <p>19 object..... 110</p> <p>object..... 111</p> <p>20 object..... 112</p> <p>object..... 112</p> <p>21 object..... 114</p> <p>object..... 116</p> <p>22 object..... 121</p> <p>object..... 121</p> <p>23 object..... 122</p> <p>object..... 123</p> <p>24 object..... 124</p> <p>object..... 127</p> <p>25 objection..... 133</p>	<p style="text-align: right;">Page 12</p> <p>1 objection..... 301</p> <p>objection..... 302</p> <p>2 object..... 303</p> <p>object..... 304</p> <p>3 object..... 304</p> <p>objection..... 304</p> <p>4 object..... 305</p> <p>objection..... 306</p> <p>5 Objection..... 307</p> <p>objection..... 309</p> <p>6 objection..... 312</p> <p>objection..... 318</p> <p>7 object..... 318</p> <p>objection..... 320</p> <p>8 objection..... 321</p> <p>objection..... 321</p> <p>9 objection..... 325</p> <p>objection..... 325</p> <p>10 objection..... 325</p> <p>objection..... 326</p> <p>11 objection..... 327</p> <p>objection..... 328</p> <p>12 objection..... 329</p> <p>objection..... 330</p> <p>13 objection..... 332</p> <p>objection..... 337</p> <p>14 objection..... 340</p> <p>objection..... 342</p> <p>15 objection..... 343</p> <p>objection..... 351</p> <p>16 objection..... 357</p> <p>objection..... 358</p> <p>17 objection..... 360</p> <p>objection..... 362</p> <p>18 objection..... 363</p> <p>objection..... 364</p> <p>19 objection..... 365</p> <p>objection..... 367</p> <p>20 objection..... 368</p> <p>objection..... 374</p> <p>21 objection..... 376</p> <p>objection..... 382</p> <p>22 objection..... 390</p> <p>objection..... 392</p> <p>23 objection..... 395</p> <p>objection..... 396</p> <p>24 objection..... 399</p> <p>objection..... 400</p> <p>25 objection..... 401</p>
<p style="text-align: right;">Page 11</p> <p>1 objection..... 138</p> <p>objection..... 139</p> <p>2 objection..... 141</p> <p>objection..... 143</p> <p>3 objection..... 145</p> <p>objection..... 155</p> <p>4 objection..... 157</p> <p>objection..... 158</p> <p>5 objection..... 160</p> <p>objection..... 171</p> <p>6 objection..... 173</p> <p>objection..... 174</p> <p>7 objection..... 175</p> <p>objection..... 176</p> <p>8 objection..... 178</p> <p>objection..... 180</p> <p>9 objection..... 184</p> <p>objection..... 186</p> <p>10 objection..... 189</p> <p>Objection..... 205</p> <p>11 objection..... 205</p> <p>objection..... 206</p> <p>12 objection..... 208</p> <p>objection..... 210</p> <p>13 objection..... 224</p> <p>objection..... 225</p> <p>14 objection..... 235</p> <p>objection..... 236</p> <p>15 objection..... 242</p> <p>objection..... 248</p> <p>16 objection..... 249</p> <p>objection..... 252</p> <p>17 objection..... 254</p> <p>objection..... 256</p> <p>18 objection..... 261</p> <p>objection..... 261</p> <p>19 objection..... 271</p> <p>objection..... 274</p> <p>20 objection..... 276</p> <p>objection..... 279</p> <p>21 objection..... 279</p> <p>objection..... 281</p> <p>22 objection..... 281</p> <p>objection..... 282</p> <p>23 objection..... 285</p> <p>objection..... 296</p> <p>24 objection..... 299</p> <p>objection..... 300</p> <p>25 objection..... 300</p>	<p style="text-align: right;">Page 13</p> <p>1 objection..... 402</p> <p>objection..... 402</p> <p>2 objection..... 405</p> <p>objection..... 406</p> <p>3 objection..... 419</p> <p>misstates her testimony..... 420</p> <p>4 objection..... 421</p> <p>objection..... 425</p> <p>5 objection..... 426</p> <p>objection..... 426</p> <p>6 objection..... 429</p> <p>objection..... 429</p> <p>7 objection..... 430</p> <p>objection..... 432</p> <p>8 objection..... 435</p> <p>objection..... 439</p> <p>9 objection..... 440</p> <p>objection..... 441</p> <p>10 objection..... 441</p> <p>objection..... 443</p> <p>11 objection..... 444</p> <p>objection..... 449</p> <p>12 objection..... 450</p> <p>objection..... 451</p> <p>13 objection..... 453</p> <p>14</p> <p>15</p> <p>16</p> <p>17</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>

<p style="text-align: right;">Page 14</p> <p>1 THE VIDEOGRAPHER: We're now on the 2 record. 3 Please note that the microphones 4 are sensitive and may pick up whispering and 5 private conversations. 6 Please turn off all cell phones or 7 place them away from microphones as they can 8 interfere with the deposition audio. 9 Recording will continue until all 10 parties agree to go off the record. 11 My name is Randy Andrews, 12 representing Veritext. 13 The date today is January 15, 2019. 14 The time is approximately 8:30 a.m. 15 This deposition is being held at 16 the Sheraton Suites located at 1989 Front 17 Street in Cuyahoga Falls, Ohio, and is being 18 taken by counsel for the Defendants. 19 The caption of this case is in re: 20 to the National Prescription Opiate Litigation. 21 This case is being held in the U.S. District 22 Court, Northern District of Ohio, Eastern 23 Division, Case No. 17-md-2804. 24 The name of the witness is Greta 25 Johnson.</p>	<p style="text-align: right;">Page 16</p> <p>1 MR. SCHUTTE: Scott Schutte from 2 Morgan Lewis on behalf of Rite Aid. 3 MS. FEINSTEIN: Wendy West 4 Feinstein from Morgan Lewis on behalf of the 5 Teva Defendants. 6 MR. RAIOLA: Stephen Raiola with 7 Covington & Burling on behalf of McKesson. 8 MS. WINNER: Sonya Winner from 9 Covington & Burling on behalf of McKesson. 10 And on the phone? 11 MR. JOHNSON: Jim Johnson -- 12 MS. RENDON: Good morning. 13 MR. JOHNSON: I'm sorry. Jim 14 Johnson on behalf of A -- ABDC. 15 MS. RENDON: Good morning. Carole 16 Rendon from Baker and Hostetler on behalf of 17 the Endo Defendants. 18 MS. WINNER: Is there anyone else 19 on the phone? Okay. 20 THE VIDEOGRAPHER: Our court 21 reporter, Stephen DeBacco, representing 22 Veritext, will swear in the witness, and we can 23 proceed. 24 GRETA JOHNSON, of lawful age, called for 25 examination as provided by the Federal Rules of</p>
<p style="text-align: right;">Page 15</p> <p>1 At this time, the attorneys present 2 in the room and everyone attending remotely 3 will identify themselves and the parties they 4 represent. 5 MS. KEARSE: Anne Kears with 6 Motley Rice on behalf of the County of Summit, 7 City of Akron, and Greta Johnson. 8 MS. FLOWERS: Good morning. It's 9 Jodi Flowers from Motley Rice on behalf of the 10 witness, the County of Summit, and the City of 11 Akron. 12 MS. KOUBA: Annie Kouba from Motley 13 Rice on behalf of the County of Summit, City of 14 Akron, and the witness. 15 MS. SALERNO: Danielle Salerno with 16 Motley Rice on behalf of City of Akron, Summit 17 County, and Greta Johnson. 18 MR. LOMAX: Christopher Lomax with 19 Jones Day on behalf of Walmart. 20 MR. HAWKINS: Will Hawkins of 21 Williams & Connolly on behalf of Cardinal 22 Health. 23 MR. ADAMS: Zach Adams on behalf of 24 Tucker Ellis -- or here from Tucker Ellis -- on 25 behalf of J&J and Janssen Pharmaceutical.</p>	<p style="text-align: right;">Page 17</p> <p>1 Civil Procedure, being by me first duly sworn, 2 as hereinafter certified, deposed and said as 3 follows: 4 EXAMINATION OF GRETA JOHNSON 5 BY MS. WINNER: 6 Q. Good morning. 7 A. Good morning. 8 Q. Could you give us your name? Your 9 full name and your address, please? 10 A. Greta Johnson, 4488 Regal Drive, 11 Copley, Ohio 44321. 12 Q. And where are you currently 13 employed? 14 A. With the Summit County Executive's 15 Office. 16 Q. And what is your position there? 17 A. Assistant chief of staff and public 18 information officer. 19 Q. Now, you're a lawyer; is that 20 right? 21 A. Yes. 22 Q. Have you ever had your deposition 23 taken before? 24 A. I have not had my deposition taken. 25 Q. Have you ever taken a deposition?</p>

<p style="text-align: right;">Page 18</p> <p>1 A. I have not.</p> <p>2 Q. Okay. But you -- I understand -- I</p> <p>3 assume you know the basic ground rules of --</p> <p>4 A. Yes.</p> <p>5 Q. -- what we're doing here today?</p> <p>6 A. Yes.</p> <p>7 Q. Okay. I'm not going to go through</p> <p>8 the whole song and dance, because I assume that</p> <p>9 you know what's going on, but if you have a</p> <p>10 question, feel free to speak up.</p> <p>11 A. I will. Thank you.</p> <p>12 Q. The one thing I will say to you is</p> <p>13 that I'm going to try to make my questions</p> <p>14 understandable, but if I fail in that and</p> <p>15 you -- you have a problem with one of my</p> <p>16 questions, you think you don't understand it,</p> <p>17 please speak up.</p> <p>18 A. Sure.</p> <p>19 Q. Because otherwise I'm going to</p> <p>20 assume that you think -- at least you think you</p> <p>21 know you understand the question and you're</p> <p>22 trying to answer it.</p> <p>23 A. Okay.</p> <p>24 Q. And your lawyer may object at some</p> <p>25 point to some of my questions. If they object,</p>	<p style="text-align: right;">Page 20</p> <p>1 that life to where I am now.</p> <p>2 Q. Was there any other reason why you</p> <p>3 made the switch?</p> <p>4 A. It's a term-limited position, so</p> <p>5 spending eight years in the deepest minority</p> <p>6 the state's ever seen didn't really have a lot</p> <p>7 of job prospects at the end of it, so it was a</p> <p>8 really good opportunity for me.</p> <p>9 Q. And I take it you're a Democrat?</p> <p>10 A. Yes.</p> <p>11 Q. Now, before you were a legislator,</p> <p>12 you were a prosecutor; is that right?</p> <p>13 A. Yes.</p> <p>14 Q. And how many years were you a</p> <p>15 prosecutor?</p> <p>16 A. I was in the Mahoning County</p> <p>17 Prosecutor's Office about six months right out</p> <p>18 of -- right just fresh from the bar exam.</p> <p>19 I spent about seven and a half</p> <p>20 years with the Summit County Prosecutor's</p> <p>21 Office, and then about two and a half years</p> <p>22 with the City of Akron Prosecutor's Office. So</p> <p>23 just over a decade as a prosecutor.</p> <p>24 Q. And what kinds of cases did you</p> <p>25 prosecute?</p>
<p style="text-align: right;">Page 19</p> <p>1 you're still allowed to answer unless they</p> <p>2 affirmatively instruct you not to.</p> <p>3 Do you understand that?</p> <p>4 A. Yes.</p> <p>5 Q. Okay. Have you ever testified at</p> <p>6 all --</p> <p>7 A. Yes.</p> <p>8 Q. -- under oath?</p> <p>9 In what situations have you</p> <p>10 testified?</p> <p>11 A. I've testified in grand jury</p> <p>12 proceedings, in criminal trial, in a civil</p> <p>13 injunction hearing, and multiple times in the</p> <p>14 state House and senate committees here in Ohio.</p> <p>15 Q. And you're a former legislator; is</p> <p>16 that correct?</p> <p>17 A. It is.</p> <p>18 Q. How long were you in the</p> <p>19 legislature?</p> <p>20 A. Just I served one full term and</p> <p>21 then about four months of my second term.</p> <p>22 Q. And why did you leave the</p> <p>23 legislature?</p> <p>24 A. The executive offered me a job, and</p> <p>25 it was a good opportunity to transition from</p>	<p style="text-align: right;">Page 21</p> <p>1 A. Everything from a traffic violation</p> <p>2 with the City of Akron to death penalty cases</p> <p>3 with the Summit County Common Pleas, yes.</p> <p>4 Q. Did you prosecute any drug cases?</p> <p>5 A. Yes.</p> <p>6 Q. What kinds?</p> <p>7 A. All kinds. Possession,</p> <p>8 trafficking, deception to obtain dangerous</p> <p>9 drugs, corruption of another with drugs. I</p> <p>10 think it's fair to say any of the drug offenses</p> <p>11 in the Ohio Revised Code I have prosecuted.</p> <p>12 Q. Now, when you -- you said earlier</p> <p>13 that you testified in grand jury proceedings.</p> <p>14 Was that during the time when you were a</p> <p>15 prosecutor?</p> <p>16 A. Yes.</p> <p>17 Q. And you said you've testified in a</p> <p>18 civil injunction hearing. What was the subject</p> <p>19 matter of that?</p> <p>20 A. It was when I was in the</p> <p>21 legislature. It was a matter regarding the</p> <p>22 Youngstown city public schools and sort of the</p> <p>23 State takeover of -- of that school system.</p> <p>24 Q. Have you testified previously in</p> <p>25 any case involving drugs?</p>

<p style="text-align: right;">Page 22</p> <p>1 A. No.</p> <p>2 MS. WINNER: I'd like to mark as</p> <p>3 Exhibit 1 document entitled Second Amended</p> <p>4 Notice of Videotaped Deposition.</p> <p>5 - - - - -</p> <p>6 (Thereupon, Deposition Exhibit 1,</p> <p>7 Second Amended Notice of Videotaped</p> <p>8 30(b)(6) Deposition of the County of</p> <p>9 Summit, was marked for purposes of</p> <p>10 identification.)</p> <p>11 - - - - -</p> <p>12 MS. WINNER: Actually, it's Second</p> <p>13 Amended Notice of Videotaped 30(B)(6)</p> <p>14 Deposition of the County of Summit.</p> <p>15 Q. Have you seen this before?</p> <p>16 A. Yes, I believe I have. I just want</p> <p>17 to make sure. I saw there were some</p> <p>18 modifications to the ones I've seen.</p> <p>19 Yes, this looks -- yes.</p> <p>20 Q. I think that this is probably</p> <p>21 modified from the version you saw in terms of</p> <p>22 the -- the date and location of the deposition.</p> <p>23 A. Sure. Yes, yes.</p> <p>24 Q. Are you here today testifying in</p> <p>25 response to this notice?</p>	<p style="text-align: right;">Page 24</p> <p>1 MS. WINNER: Understood.</p> <p>2 THE WITNESS: I'm sorry. What --</p> <p>3 I'm sorry. What was the question?</p> <p>4 Q. The question was, what did you do</p> <p>5 to prepare for the deposition?</p> <p>6 A. Sure. So I met with the team of</p> <p>7 attorneys from Motley Rice seven or eight</p> <p>8 times.</p> <p>9 I read, I believe, where I was up</p> <p>10 to about 14 transcripts that have previously</p> <p>11 been taken regarding this case. I've reviewed</p> <p>12 documents.</p> <p>13 I've spoken to multiple people who</p> <p>14 are involved in gathering information regarding</p> <p>15 the case.</p> <p>16 Sat down and met with our budget</p> <p>17 and finance director.</p> <p>18 I've met with Patrick Leonard, a</p> <p>19 detective for the Akron Police Department.</p> <p>20 Spoken with Lori Baker-Stella, who</p> <p>21 is a detective for the Summit County Sheriff's</p> <p>22 Office.</p> <p>23 Met extensively with our public</p> <p>24 safety director, Lori Pesci.</p> <p>25 Met with Donna Skoda, the Summit</p>
<p style="text-align: right;">Page 23</p> <p>1 A. Yes.</p> <p>2 Q. And you understand that you have</p> <p>3 been designated by the County of Summit to</p> <p>4 testify on its behalf today?</p> <p>5 A. Yes.</p> <p>6 Q. What did you do to prepare for</p> <p>7 today's deposition?</p> <p>8 MS. KEARSE: I'm just going to make</p> <p>9 one note. There is a letter that gave specific</p> <p>10 topics that she was being designated for, so</p> <p>11 it's not -- I think this still includes every</p> <p>12 single topic, right?</p> <p>13 MS. WINNER: That's correct.</p> <p>14 MS. KEARSE: So it's the designated</p> <p>15 cop- -- topics that we shared in our letter of</p> <p>16 December 17, 2018.</p> <p>17 MS. WINNER: I think which was then</p> <p>18 amended by an e-mail exchange when you added a</p> <p>19 couple of others.</p> <p>20 MS. KEARSE: The -- the -- right.</p> <p>21 The 4, 5, 6, 19. Yeah.</p> <p>22 MS. WINNER: I'll -- I'll pull that</p> <p>23 out and get it on the record later.</p> <p>24 MS. KEARSE: Okay. Just so we're</p> <p>25 clear, it's not the total notice.</p>	<p style="text-align: right;">Page 25</p> <p>1 County Public Health director.</p> <p>2 Just read a lot of documents.</p> <p>3 And frankly, I've been a public</p> <p>4 servant in Summit County for over the last 13</p> <p>5 years, so I feel like my own personal</p> <p>6 experience really has prepared me in the best</p> <p>7 way to put that all into context.</p> <p>8 Q. Now, you said you read -- I'm</p> <p>9 sorry. Did you finish your answer?</p> <p>10 A. I think -- I think so, yes.</p> <p>11 Q. Okay. If I ever --</p> <p>12 A. Sure.</p> <p>13 Q. -- inadvertently interrupt you,</p> <p>14 please speak up.</p> <p>15 A. Sure.</p> <p>16 Q. You said you read 14 --</p> <p>17 A. Uh-huh.</p> <p>18 Q. -- about 14 transcripts?</p> <p>19 A. I think so.</p> <p>20 Q. Were these all deposition</p> <p>21 transcripts?</p> <p>22 A. Yes, ma'am.</p> <p>23 Q. Do you know whose depositions they</p> <p>24 were?</p> <p>25 A. Yes. I read Matt Paolino's, Shane</p>

<p style="text-align: right;">Page 26</p> <p>1 Barker's, Hylton Baker's. I read Julie Barnes, 2 Donna Skoda, Tonya Block, Jackie Pollard, 3 Dr. Lisa Kohler, Dr. George Sterbenz, Steve 4 Perch. I read most of Gary Guenther's from the 5 medical examiner's office. Gertrude Wilms, 6 Brad Gessner. 7 I feel like there's one more, but 8 that's -- those are the ones I remember. 9 Q. Were all the depositions you read 10 of people employed by either Summit or Akron? 11 A. No. Chad Garner, from the pharmacy 12 board, was not. 13 I think -- well, Hylton Baker is no 14 longer employed by the Summit County Sheriff's 15 Office, but he was previously. 16 Donna Skoda and Jackie Pollard and 17 Tonya Block aren't technically employees of 18 Summit County because they are sort of a hybrid 19 with -- with public health and ADM. We do 20 their payroll, but they have different sort of 21 entities. 22 Q. Uh-huh. 23 A. We're -- we're all Summit County, 24 but they don't report to the executive. And 25 likewise, all of these folks work in the county</p>	<p style="text-align: right;">Page 28</p> <p>1 County. 2 Q. Anyone else? 3 A. In the last six weeks, not 4 specifically for this deposition, but -- that I 5 can think of right now. But again, my service 6 in the community, the conversations that I've 7 had, the cases I have prosecuted, my experience 8 in the state House, all of that I feel I've 9 relied on in preparation for this deposition. 10 Q. And then you say you've also 11 reviewed a number of documents. 12 A. Yes. 13 Q. Can you estimate about how many? 14 Just in rough terms. 15 A. Well, not inclusive of pleadings, I 16 don't know. Probably 100 documents. I -- I -- 17 just looking at things, I've looked at what -- 18 oh, gosh, sorry -- what the attorneys have 19 shown me. I've looked at articles that I 20 remember reading as, sort of, this crisis was 21 ongoing in our community. I looked at things 22 that I remember speaking to me, articles or ADM 23 statistics. So I would say close to 100, but 24 that's -- I -- it's not my best asset is 25 guessing numbers on things like that.</p>
<p style="text-align: right;">Page 27</p> <p>1 system or the city system. Yes. 2 Q. Did you -- have you read any of the 3 depositions of employees of Cleveland or 4 Cuyahoga County? 5 A. I have not. I have also read Brian 6 Nelson's, the finance director. 7 Q. And when you said you met with the 8 budget and finance director, was that who you 9 were referring to? 10 A. Yes. 11 Q. Are there any other people you've 12 met with other than the ones you've named 13 previously? 14 A. I've had internal communications 15 with the Summit County executive, with her 16 chief of staff, with some of the lawyers, our 17 in-house lawyers. 18 Q. Could you give me the name? 19 A. Sure. I -- sure. Sorry. Bob 20 Higham is a Summit County attorney. Deborah 21 Matz is our law director. Jason Dodson is the 22 chief of staff. Ilene Shapiro is the county 23 executive. And I think I said before, Lori 24 Pesci is the Summit County public safety 25 director. She's also an attorney for the</p>	<p style="text-align: right;">Page 29</p> <p>1 Q. Did you take notes of any of the 2 conversations you had? 3 A. Yes. 4 Q. Do you have those notes with you? 5 A. No, I do not. 6 MS. WINNER: I would like to ask to 7 have those notes produced, please. We will 8 follow up. 9 MS. KEARSE: I'm not going to -- I 10 assume you'll follow up on that, yeah. 11 Q. Did you take notes on any of the 12 documents you read? 13 A. I highlighted portions or, you 14 know, question marks. And I'm a big sticky 15 note believer, so I would tab something to 16 remind myself to follow up or to look something 17 up. Tend to read a lot on the treadmill, and 18 so it's not conducive to Google when you're on 19 the treadmill. 20 Q. Apart from reading documents, did 21 you do any research like Googling things or 22 anything like that? 23 A. A few times, yes. 24 Q. What did you research that way? 25 A. I remember reading Donna Skoda's</p>

<p style="text-align: right;">Page 30</p> <p>1 transcript, and I did not know at that time 2 that we were using fentanyl strips. I didn't 3 really know what they were, and Donna explained 4 that pretty well. But I was very interested in 5 sort of where that idea came from, so I did a 6 little bit of research on that. I remember 7 that specifically. 8 I looked up some different 9 terminology that I was not familiar with. MEE 10 [sic], I did not know what that meant, the 11 morphine equivalency. More just trying to look 12 up words I -- I didn't know or acronyms I was 13 unfamiliar with. 14 I did Google a couple of articles 15 that I remember being impactful to me and 16 wanting to go back and refresh why it mattered. 17 Things like that. 18 Q. Is there anything else you did to 19 prepare for today other than what you've 20 already described? 21 A. No. Again, I really feel strongly 22 that the best preparation I've done for this is 23 living in this community for the last 20-plus 24 years and being in public service, sort of as 25 the recipient of the knowledge and wishes of my</p>	<p style="text-align: right;">Page 32</p> <p>1 depositions and the meeting with the attorneys. 2 We met during the workday. We met on the 3 weekends. 4 Sometimes I was able to block off 5 blocks of hours during the workday to devote to 6 door shut, don't come in unless it's an 7 emergency, so that I could really focus on the 8 reading. 9 And frankly, I'm a 5:00 a.m. reader 10 and a 10:00 p.m., so try and get about an hour 11 in, like I said, on the treadmill in the 12 morning and then a couple of hours in the 13 evening. 14 Q. So has this been over the last few 15 weeks or the -- 16 A. Probably -- 17 Q. -- the last several months? 18 A. Yeah. Probably six -- at least six 19 weeks. I believe we really started -- I really 20 started reading depositions and that sort of 21 thing at the very beginning of December, but I 22 had reviewed documents. I had certainly read 23 the complaint and was aware of many of those 24 beforehand, but -- but that sort of intensive 25 preparation for about six weeks.</p>
<p style="text-align: right;">Page 31</p> <p>1 community. 2 Q. Have you read the complaint in this 3 case? 4 A. I have. 5 Q. When did you first read it? 6 A. I first read -- I believe I saw a 7 draft of it before it was filed. Shortly 8 before it was filed. And then I read it after 9 it was filed. And then throughout preparation, 10 I've been reading parts of it thoroughly again 11 sort of, you know, bringing everything in full 12 context. 13 Q. Have you reviewed the interrogatory 14 responses that Summit has provided in this 15 case? 16 A. Many of them. I don't know that 17 I've reviewed all of them, but I have reviewed 18 many. 19 Q. When did you do all this work that 20 we've just been talking about, apart from 21 living in the community? 22 A. Sure. 23 Q. Obviously you've been doing that 24 for a while, but -- 25 A. Sure. So the -- the reading of</p>	<p style="text-align: right;">Page 33</p> <p>1 Q. Well, turning back to -- to 2 Exhibit 1, you understand that Summit County 3 has designated you to testify on its behalf on 4 certain topics in this notice, correct? 5 A. Yes, ma'am. 6 Q. And do you understand that this 7 means that the testimony you're giving today 8 represents the testimony of Summit County, not 9 just your personal recollection or your 10 personal opinions? 11 A. Yes, ma'am. 12 Q. Are you aware of which topics you 13 have been asked to address? 14 A. Yes. 15 Q. Did the preparation that you've 16 described cover all of those topics? 17 A. Yes. 18 Q. As you sit here now, do you feel 19 qualified to testify as the representative of 20 Summit County on all of the topics on which 21 you've been designated? 22 A. Absolutely. 23 Q. Are there any exceptions? 24 A. No. 25 Q. Leaving aside your -- your</p>

Page 34

1 professional experiences and your work, have
 2 there been any experiences in your personal
 3 life that have affected your views about
 4 prescription opioids?
 5 A. My -- I don't know that I
 6 understand what you're asking.
 7 Q. Have you ever been affected
 8 personally, for example, positively or
 9 negatively, by prescription opioids?
 10 A. I see. I have lost a friend who
 11 overdosed in 2016. I won't give a revisionist
 12 history that we were extremely close at the
 13 time that he passed, but certainly we were in
 14 college. So, yes, I feel like that's a
 15 personal -- a personal story that I -- that I
 16 have.
 17 Q. Well, you say you lost a friend.
 18 Was this friend lost to prescription opioids?
 19 A. He was lost to opioid addiction.
 20 Q. And what -- what -- he overdosed?
 21 A. Yes.
 22 Q. And what did he overdose on?
 23 A. Heroin.
 24 Q. Had he -- okay. So he -- he was
 25 taking heroin at the time that he passed away;

Page 35

1 is that correct?
 2 A. Yes.
 3 Q. Are you aware of the history of --
 4 of his addiction?
 5 A. Yes.
 6 Q. And what's the -- your basis for
 7 that knowledge?
 8 A. He began using opioids in college
 9 for injuries that he sustained playing sports
 10 in college.
 11 Q. And how do you know that?
 12 A. We were all very close, and the
 13 news of his death passed through our group of
 14 friends rather quickly. And there was a lot of
 15 discussion about when it had started and things
 16 about, wish we -- you know, wish we had known.
 17 Q. So this is something that somebody
 18 told you?
 19 A. Yes.
 20 Q. And who told you that?
 21 A. Teammates, friends, the -- the sort
 22 of college-kid community that we had created at
 23 that time.
 24 Q. So this wasn't something that he
 25 himself told you?

Page 36

1 A. No.
 2 Q. Have you ever taken prescription
 3 opioids yourself?
 4 A. Yes.
 5 MS. KEARSE: Objection.
 6 Q. For what?
 7 A. Post surg- --
 8 MS. KEARSE: I'm just going to
 9 instruct the answer -- you're free to answer
 10 that question if you want, but you also have
 11 your own personal privacy rights as well, so --
 12 THE WITNESS: Okay.
 13 MS. KEARSE: -- you can answer if
 14 you want.
 15 A. Post-surgery.
 16 Q. And what did you take -- take it
 17 for? I mean -- excuse me -- what did you take?
 18 A. I took OxyContin. I don't -- I
 19 believe I took Percocet once, but it made me
 20 very sick.
 21 Q. Did the OxyContin help you or
 22 whatever it was you took?
 23 A. I only took it, like, two -- I
 24 think I took two doses post-surgery. Yeah. I
 25 was still pretty groggy from the anesthesia.

Page 37

1 Q. I take it you did not become
 2 addicted?
 3 A. No.
 4 Q. Did you take it as directed by your
 5 doctor?
 6 A. Yes.
 7 Q. I want to talk just a second about
 8 terminology just to make sure we're all on the
 9 same page.
 10 What do you understand an opioid to
 11 be?
 12 A. A synthetic derivative of an
 13 opiate, so a synthetic derivative of morphine
 14 or heroin. Sort of those naturally occurring
 15 opiates.
 16 Q. And what's an opiate?
 17 A. It's essentially a drug that
 18 directly attaches to receptors in our brains to
 19 either relieve pain or produce a high.
 20 Q. What is the difference between an
 21 opiate and an opioid, in your understanding?
 22 A. So they're really used
 23 interchangeably in our community.
 24 Q. That's what I thought, yeah.
 25 A. But, you know, I believe the

<p style="text-align: right;">Page 38</p> <p>1 definition to be opiates, a-t-e, is those sort 2 of origins, the opium, heroin, morphine. And 3 then opioids are sort of the synthetic 4 versions, Percocet, OxyContin, oxycodone, those 5 types of things. But they are used very 6 interchangeably. 7 Q. So for today can we agree that 8 we're not going to worry -- 9 A. Sure. 10 Q. -- about that distinction? 11 A. Absolutely. Of course. 12 Q. What drugs are considered to be 13 opioids or opiates? 14 A. Sure. So those ones that we've 15 just named, OxyContin, oxycodone, Percocet, 16 Opana, then opium, heroin, morphine. That's 17 the -- that's the laundry list I can come up 18 with. 19 Q. How about fentanyl? 20 A. Yes. Absolutely, yes. Thank -- 21 Q. How about carfentanil? 22 A. Yes. 23 Q. Is cocaine an opioid? 24 A. No. 25 Q. How about methamphetamine?</p>	<p style="text-align: right;">Page 40</p> <p>1 outweigh their risks, correct? 2 A. I know they're tested by the FDA 3 and are -- go through some sort of approval 4 process. I'm definitely not incredibly well 5 versed on the FDA process. 6 Q. But they're regulated by the FDA 7 and the DEA? 8 A. Yes. 9 Q. And prescription opioids are 10 prescribed by doctors to treat medical 11 conditions, correct? 12 A. They can be. 13 Q. Well, they're -- okay. And they 14 are, in fact? 15 MS. KEARSE: Objection. Form. 16 Q. They are, in fact, prescribed by 17 doctors for medical purposes. 18 A. They can be, yes. 19 Q. Well, I'm just -- I just want to 20 make sure we're not quibbling here. 21 Yes, some of it could be something 22 that can be but never happens. It, in fact, 23 happens that doctors do prescribe opioids for 24 medical conditions, correct? 25 A. Yes.</p>
<p style="text-align: right;">Page 39</p> <p>1 A. No. Not -- those two are not in 2 and of themselves, only when mixed, yes. 3 Q. But they are sometimes mixed? 4 A. Yes. 5 Q. And that's sometimes a problem? 6 A. Yes. 7 Q. What about Xanax? 8 A. No. 9 Q. How about marijuana? 10 A. No. 11 Q. Do prescription -- does the term 12 "prescription opioid" have a meaning to you? 13 A. Yes. 14 Q. And what would be included in 15 prescription opioids? 16 A. OxyContin, oxycodone, Percocet, 17 Vicodin, Opana, Dilaudid. 18 Q. So those are the opioids that are 19 prescribed to people? 20 A. Yes. 21 Q. Do prescription opioids have 22 beneficial and lawful uses? 23 A. Yes. 24 Q. And they're tested and reviewed by 25 the FDA to make sure their benefits out- --</p>	<p style="text-align: right;">Page 41</p> <p>1 Q. But opioids like heroin are illegal 2 to produce, distribute, and possess, correct? 3 MS. KEARSE: Object to form. 4 A. I'm sorry. Could you say that 5 again? 6 Q. Heroin is illegal to produce, to 7 distribute, and to possess, correct? 8 A. Correct, yes. 9 Q. By the way, do you know who the 10 Defendants in this case are? 11 A. I do. 12 Q. Okay. And none of those Defendants 13 produces, distributes, or dispenses heroin, 14 correct? 15 A. No, but they do produce, distribute 16 opioids. 17 Q. I understand that, but they don't 18 produce or distribute heroin, correct? 19 A. Correct. 20 Q. Now, I've seen in the complaint -- 21 I'm sure you have too -- references to things 22 like an "opioid epidemic" and an "opioid 23 crisis." 24 A. Uh-huh. 25 Q. Are those terms that are familiar</p>

<p style="text-align: right;">Page 42</p> <p>1 to you?</p> <p>2 A. Yes.</p> <p>3 Q. And what does Summit County mean by</p> <p>4 those terms in its complaint?</p> <p>5 A. I think any time there is an</p> <p>6 individual suffering from addiction, that is a</p> <p>7 crisis in that person's family, and that</p> <p>8 becomes a crisis in their community. And when</p> <p>9 you add all of those crises up, you have an</p> <p>10 epidemic.</p> <p>11 You know, the -- the root of the</p> <p>12 term really comes down to this -- this illness</p> <p>13 or plague occurring in a much more rapid or</p> <p>14 increased fashion than should be in a</p> <p>15 population. So all of those crises add up to</p> <p>16 the epidemic that our county is facing.</p> <p>17 Q. What drugs are involved in the</p> <p>18 opioid epidemic, as you used that term?</p> <p>19 A. Right. So all of the drugs that</p> <p>20 we've talked about, Vicodin, Percocet,</p> <p>21 OxyContin, oxycodone, and the naturally</p> <p>22 occurring ones, heroin, morphine, and the</p> <p>23 introduction of fentanyl and carfentanil into</p> <p>24 our community.</p> <p>25 Q. Is cocaine part of the opioid</p>	<p style="text-align: right;">Page 44</p> <p>1 And then as the legislature and</p> <p>2 regulations sort of began to ratchet down</p> <p>3 and -- and monitor more closely, OARRS became</p> <p>4 more accessible and more usable for a wider</p> <p>5 variety of folks in the county, that's when we</p> <p>6 started to see the shift from people who could</p> <p>7 no longer get the opioids that they had become</p> <p>8 so addicted to. They couldn't get a \$40, 40</p> <p>9 milligram pill anymore, but they could easily</p> <p>10 get a \$10 bag of heroin, and so this -- this</p> <p>11 opioid addiction created space and created the</p> <p>12 market for the always illegal heroin, morphine,</p> <p>13 those types of things.</p> <p>14 So we really started to see the</p> <p>15 increase from the late 2000s into the early</p> <p>16 teens. And we began to take notice of how many</p> <p>17 folks were seeking recovery treatment through</p> <p>18 ADM and the public health department in the</p> <p>19 early teens.</p> <p>20 We started to see an increase of</p> <p>21 NAS in our babies being born. We started to</p> <p>22 see an increased need for funding to low level</p> <p>23 felony defense. We started to see an increase</p> <p>24 in our jail population. And that started to</p> <p>25 really bloom, for lack of a better word, into</p>
<p style="text-align: right;">Page 43</p> <p>1 epidemic?</p> <p>2 A. It has become sort of this</p> <p>3 stepsister to the epidemic because of the</p> <p>4 shifts in the way people are using opioids.</p> <p>5 Cocaine has been used more recently in</p> <p>6 conjunction with opioids.</p> <p>7 Q. Is -- in your understanding, is the</p> <p>8 opioid epidemic what this lawsuit is about?</p> <p>9 A. This lawsuit is -- is about the</p> <p>10 aggregate harm that's been caused by the</p> <p>11 manufacture and distribution of opioids into</p> <p>12 our community.</p> <p>13 Q. When did the opioid epidemic begin?</p> <p>14 A. Opioids have always been in our</p> <p>15 community, but I believe we really saw an</p> <p>16 uptick in the presence of diverted pills and</p> <p>17 use really started to come along in the late</p> <p>18 2000s.</p> <p>19 And certainly we noticed that in</p> <p>20 the prosecutor's office where folks were being</p> <p>21 arrested and having one or two pills in their</p> <p>22 pocket, folks were being arrested for deception</p> <p>23 to obtain a dangerous drug or forging drug</p> <p>24 documents. We started to see that uptick in</p> <p>25 the late -- in the late 2000s.</p>	<p style="text-align: right;">Page 45</p> <p>1 '14, '15, '16, '17, where we literally had</p> <p>2 bodies stacking up at the county medical</p> <p>3 examiner's office due to overdose.</p> <p>4 Q. Okay. Is there a specific time, a</p> <p>5 date, where you see a demarcation between when</p> <p>6 there was -- wasn't an epidemic, opioid</p> <p>7 epidemic, to when there was?</p> <p>8 A. Well, I -- I think there are many</p> <p>9 factors that exacerbate -- exacerbated it. The</p> <p>10 onset of the fifth vital sign becoming -- you</p> <p>11 know, pain becoming the fifth vital sign</p> <p>12 certainly created space for this flood of pills</p> <p>13 that came into our community.</p> <p>14 It's hard to pick one specific day</p> <p>15 because there's this level of legality that</p> <p>16 surrounds prescription pills that does not</p> <p>17 surround the trip -- the typical drug cases</p> <p>18 that we encountered in Summit County.</p> <p>19 So this flood of pills came into</p> <p>20 our community in -- in sort of record fashion,</p> <p>21 so I -- I couldn't say one particular day in</p> <p>22 time. It is a wave that is growing and growing</p> <p>23 and continues to grow.</p> <p>24 Q. When was the -- when did you first</p> <p>25 become -- personally become aware that there</p>

<p style="text-align: right;">Page 46</p> <p>1 was a problem?</p> <p>2 A. Personally? I first became aware</p> <p>3 that there was a real difference in some of the</p> <p>4 cases I was seeing. I was seeing, instead of</p> <p>5 detectives who were bringing in crack cases or</p> <p>6 things like that, we started to see a lot of</p> <p>7 pill cases; a lot of defendants without a prior</p> <p>8 record, being arrested for possession of</p> <p>9 oxycodone, OxyContin, Percocets. And we</p> <p>10 started to see, in the late 2000s, this</p> <p>11 increase in cases of deception to obtain and</p> <p>12 forging drug documents.</p> <p>13 These folks had become so addicted</p> <p>14 that they were resorting to, you know, trying</p> <p>15 to write false prescriptions, trying to obtain</p> <p>16 these pills in a different manner.</p> <p>17 Q. And when was it that you started</p> <p>18 seeing this?</p> <p>19 A. In the late 2000s is really --</p> <p>20 Q. 2007? 2008? Somewhere in there?</p> <p>21 A. I -- I remember it steadily</p> <p>22 growing. I can recall being -- in 2009, I was</p> <p>23 the grand jury prosecutor, and I recall seeing</p> <p>24 many of those cases in sort of a way that I had</p> <p>25 not previously.</p>	<p style="text-align: right;">Page 48</p> <p>1 Document Titled, "Drug Threat</p> <p>2 Assessment, Summit County, Ohio,"</p> <p>3 SUMMIT_000023567 to 000023648, was</p> <p>4 marked for purposes of</p> <p>5 identification.)</p> <p>6 - - - - -</p> <p>7 Q. Have you seen this before?</p> <p>8 A. I have.</p> <p>9 Q. Is this one of the documents you</p> <p>10 reviewed?</p> <p>11 A. It is.</p> <p>12 Q. Are you familiar with Captain</p> <p>13 Baker?</p> <p>14 A. I am.</p> <p>15 Q. What was Captain Baker's position?</p> <p>16 A. He was the captain -- I think that</p> <p>17 was his highest rank. He was the captain</p> <p>18 assigned to the Summit County Drug Unit with</p> <p>19 the Summit County Sheriff's Office.</p> <p>20 Q. And in that position, was he</p> <p>21 familiar with the drug enforcement situation in</p> <p>22 Summit County?</p> <p>23 A. Yes.</p> <p>24 Q. If you turn to page 62 of this</p> <p>25 document -- oh, first of all, this -- this</p>
<p style="text-align: right;">Page 47</p> <p>1 Q. Do you think, at the time that you</p> <p>2 personally perceived that there was a problem,</p> <p>3 do you think that generally there was an</p> <p>4 understanding in Summit County at that time</p> <p>5 that there was a problem?</p> <p>6 A. Calling it a problem, I think at</p> <p>7 that time, as a prosecutor, I was aware that</p> <p>8 this was a change that we were perceiving. I</p> <p>9 think at that time the ADM Board and Summit</p> <p>10 County Public Health started to perceive that</p> <p>11 the people seeking treatment were coming in for</p> <p>12 opioid addiction in greater numbers than they</p> <p>13 had previously seen. I think our hospitals saw</p> <p>14 that there were more babies being born with NAS</p> <p>15 than they had previously seen.</p> <p>16 And at that point, I think, you</p> <p>17 know, there were some -- some concerns, but not</p> <p>18 a true identification of the root cause yet.</p> <p>19 MS. WINNER: I'd like to ask the</p> <p>20 reporter to mark as Exhibit 2 a document</p> <p>21 entitled "Drug Threat Assessment, Summit</p> <p>22 County, Ohio." It appears to be a 2005</p> <p>23 document.</p> <p>24 - - - - -</p> <p>25 (Thereupon, Deposition Exhibit 2,</p>	<p style="text-align: right;">Page 49</p> <p>1 document appears on its face to -- to -- dated</p> <p>2 to approximately 2005. It says it's an</p> <p>3 addendum to a 2005 Justice Assistance Grant</p> <p>4 application.</p> <p>5 A. Okay.</p> <p>6 Q. Do you see that at the top?</p> <p>7 A. I do.</p> <p>8 Q. And would you agree with me that</p> <p>9 this -- this document dates to 2005?</p> <p>10 A. I'm sure it was in 2005 or 2006.</p> <p>11 Typically, when we apply for grants, sometimes</p> <p>12 the addendums are filed the year after.</p> <p>13 Q. Have you ever discussed this</p> <p>14 document with Captain Baker?</p> <p>15 A. I have not. Not, you know,</p> <p>16 personally discussed it with him, no.</p> <p>17 Q. Was he one of the people you talked</p> <p>18 to, or did you just reread his deposition</p> <p>19 transcript?</p> <p>20 A. I --</p> <p>21 MS. KEARSE: Object to form.</p> <p>22 A. I did not speak with Captain Baker.</p> <p>23 I haven't seen him in -- in years, frankly. I</p> <p>24 read his deposition.</p> <p>25 Q. Did you work with him when you were</p>

<p style="text-align: right;">Page 50</p> <p>1 a prosecutor?</p> <p>2 A. I did, yes.</p> <p>3 Q. If you would turn to page 62 --</p> <p>4 A. Uh-huh.</p> <p>5 Q. -- of this document, there's a</p> <p>6 section on pharmaceuticals. Do you see that?</p> <p>7 A. I do.</p> <p>8 Q. And the first thing that is said</p> <p>9 here is that the level of threat is very high.</p> <p>10 A. Yes.</p> <p>11 Q. And do you agree that that was a</p> <p>12 true statement?</p> <p>13 A. I -- I don't know -- I'd have to</p> <p>14 look at this a little bit more thoroughly. I</p> <p>15 don't know what the scale is. I -- I wouldn't</p> <p>16 speak to -- to know what Captain Baker saw as</p> <p>17 very high or extremely high or -- I don't know</p> <p>18 that.</p> <p>19 Q. Do you have any reason to think</p> <p>20 that this characterization of the level of</p> <p>21 threat of pharmaceuticals in 2005 or 2006,</p> <p>22 whenever he wrote this, was very high?</p> <p>23 A. Well, certainly he turned out to be</p> <p>24 right, so, no.</p> <p>25 Q. The first sentence under "Level of</p>	<p style="text-align: right;">Page 52</p> <p>1 Is that a correct statement, as far</p> <p>2 as you were aware?</p> <p>3 A. I just want to read it again. It's</p> <p>4 a long sentence.</p> <p>5 Q. Sure.</p> <p>6 A. Yes, I would agree with that.</p> <p>7 Q. So again, this is -- this is</p> <p>8 information that was known to Summit County in</p> <p>9 2005, correct?</p> <p>10 A. Yes. We were starting to become</p> <p>11 very aware that pills were beginning to flood</p> <p>12 our community.</p> <p>13 Q. And the next sentence goes on to</p> <p>14 say, quote, "In a sampling of data from the</p> <p>15 Akron Police Department's narcotics unit</p> <p>16 diversion division during the first quarter of</p> <p>17 2004, the unit investigated 60 new diversion</p> <p>18 cases, or one case every day and a half," end</p> <p>19 quote.</p> <p>20 Is that an accurate statement, as</p> <p>21 far as you were aware?</p> <p>22 A. I assume that the Akron Police</p> <p>23 narcotics unit can provide the data that would</p> <p>24 back that up. I can't imagine there would be</p> <p>25 any reason that Captain Baker would have</p>
<p style="text-align: right;">Page 51</p> <p>1 threat" says, "The diversion of narcotics and</p> <p>2 pain analgesics in Summit County continues to</p> <p>3 increase."</p> <p>4 A. Uh-huh.</p> <p>5 Q. Do you see that?</p> <p>6 A. Yes, I do.</p> <p>7 Q. And was that a correct statement in</p> <p>8 2005?</p> <p>9 A. I'm sure that it was.</p> <p>10 Q. And then it then goes on to refer</p> <p>11 to some of the -- the drugs --</p> <p>12 A. Yes.</p> <p>13 Q. -- correct?</p> <p>14 And then under "Availability," he</p> <p>15 goes on to say, quote, "While there are no</p> <p>16 conclusive estimates as to the total amount of</p> <p>17 diverted prescription narcotics, depressants,</p> <p>18 and stimulants available in the drug markets of</p> <p>19 Summit County, it is known that legitimate</p> <p>20 commercial disbursement of prescription</p> <p>21 pharmaceuticals distributed to pharmacies,</p> <p>22 hospitals, and practitioners has increased</p> <p>23 sharply over the past four years, thereby</p> <p>24 making more of the drugs available to criminal</p> <p>25 diversion and abuse."</p>	<p style="text-align: right;">Page 53</p> <p>1 grabbed that number out of thin air.</p> <p>2 Q. If you then go on to the whole next</p> <p>3 section, "Associated Crimes and Violence." Do</p> <p>4 you see that later in the page?</p> <p>5 A. I do.</p> <p>6 Q. And it says, quote, "Criminal</p> <p>7 actions associated with pharmaceutical</p> <p>8 diversion in Summit County include burglaries</p> <p>9 and robberies of drugstores. Several pharmacy</p> <p>10 robberies have occurred in Summit County. Most</p> <p>11 notable was a man seeking OxyContin," end</p> <p>12 quote.</p> <p>13 Is that a truthful statement, to</p> <p>14 your knowledge?</p> <p>15 A. Yes, but certainly additional</p> <p>16 crimes began to happen as well. We prosecuted</p> <p>17 robberies not just of pharmacies, but</p> <p>18 individuals were robbed because someone in the</p> <p>19 community found out that they had opioids in</p> <p>20 their home for -- or were prescribed opioids.</p> <p>21 And there were particular cases where, you</p> <p>22 know, folks were robbed at gunpoint for these</p> <p>23 because of their street value at that time and</p> <p>24 because of the overwhelming demand for these</p> <p>25 pills.</p>

<p style="text-align: right;">Page 54</p> <p>1 Q. And this was -- again, this was 2 back in 2005 when he wrote this report? 3 A. He wrote this report in 2005, yes. 4 But these cases that he's talking 5 about, those continued to increase. Where it 6 may have been a pharmacy or two in 2005, by the 7 late 2000s opioids were so in demand and were 8 becoming so much less available through the 9 normal courses, folks were resorting to really 10 desperate measures to get these pills. 11 Q. The -- when you say that -- that 12 people resorting to -- to desperate measures to 13 obtain the pills as they were becoming less 14 available, are you aware of any statistical 15 studies that were done in Summit County to 16 confirm that that was the reason for the 17 change? 18 A. I don't need a statistical study. 19 I saw it. I -- I had these cases in front of 20 me. We had these victims who had been 21 prescribed, who would come in and talk about 22 how they'd had guns pointed in their face. 23 But the most important thing to 24 them was not the measure of justice that the 25 criminal justice system could provide, but</p>	<p style="text-align: right;">Page 56</p> <p>1 2010 sort of starts what I call the early 2 teens. 3 Q. Now, did you see Captain Baker's 4 testimony in his deposition that he has been 5 investigating crimes relating to unlawful 6 trafficking in prescription opioids for 7 decades? 8 A. Yes. 9 Q. And do you have any reason to doubt 10 that that's correct? 11 A. No. 12 Q. The pharmaceutical -- the -- is 13 the -- the prevalence of prescription opioid 14 crime is, in fact, less today than it was in 15 the late 2000s, is it not? 16 MS. KEARSE: Object to form. 17 A. The prevalence of crime? 18 Q. Crime relating specifically to 19 prescription opioids -- 20 A. Are you -- 21 Q. -- is less today? 22 A. Are you talking about violent 23 crime? Or are you talking about the criminal 24 act of obtaining -- 25 Q. The criminal -- the criminal acts</p>
<p style="text-align: right;">Page 55</p> <p>1 getting a note from the prosecutor saying, you 2 know, "It's okay to prescribe him more pills. 3 They really were stolen." The animalistic need 4 for these opioids overwhelmed the victim's 5 desire to seek justice. 6 Q. So you say there were -- there were 7 occasions that you saw when that was the case, 8 correct? 9 A. Absolutely. 10 Q. But my -- my question is -- is if 11 one tries to extrapolate that to the community, 12 are you aware of any statistical studies or 13 research studies that were done to confirm that 14 these weren't just some selected cases that you 15 saw, but more generic? 16 A. I don't know if the Summit 17 County -- I'd -- I'd have to refer back to the 18 Summit County Sheriff's Office, their annual 19 report, to see if there were statistics done. 20 I don't know of any. 21 Q. Now, just to clarify. When you 22 talk about the late 2000s, are you talking 23 about -- when you say the 2000s, are you 24 talking about the decade of 2001 to 2009? 25 A. Yes, yes. And then sort of</p>	<p style="text-align: right;">Page 57</p> <p>1 relating to obtaining and using prescription 2 opioids illegally. 3 A. Is down from when? 4 Q. The late 2000s. The period you 5 were talking about. 6 A. I -- I don't know the answer to 7 that. I -- I would -- I would guess that there 8 is because you're -- you're using the term 9 "prescription opioids." Certainly we've seen a 10 dramatic increase in opioids, including heroin 11 and -- and fentanyl and -- and those types of 12 other non-prescribed opioids. 13 So I -- I guess to parse that out, 14 there are probably less deceptions to obtain a 15 dangerous drug, but there are certainly more 16 possessions of opioids, including heroin, 17 Percocet, Vicodin, all of those. 18 Q. But I'm asking specifically about 19 prescription opioids. Is the amount of -- and 20 am I correct that you're saying you don't know 21 one way or the other whether the incidents -- 22 A. I'm sure you're right. I'm sure 23 you are right, because of tools like OARRS and 24 more public awareness now, certainly, than 25 there was then, and, quite frankly, the</p>

<p style="text-align: right;">Page 58</p> <p>1 overwhelming community knowledge that these 2 are, in fact, dangerous drugs, that these are, 3 in fact, addictive, which was information we 4 really didn't have in the late 2000s. 5 Q. And when -- when did that public 6 awareness come into being? 7 A. I think we really did start to see 8 ADM -- and I'm sorry. Alcohol is -- okay 9 as ADM to use? Okay. 10 The ADM Board, Summit County Public 11 Health started to reach out to physicians. We 12 had law enforcement officers who were meeting 13 with physicians to try and educate them about 14 what drug-seeking behavior looked like. We 15 wanted to educate our physicians about how 16 incredibly addictive these were and what the 17 results would be, which would be that these 18 folks end up with needles in their arms. 19 Q. When did that happen? 20 A. That started to happen -- I want to 21 say that -- that the first, like, continuing 22 medical education piece was, I want to say, the 23 early teens. Perhaps '13 or '14 I can recall 24 Dr. Doug Smith, Dr. Kohler really starting to 25 talk to the medical community.</p>	<p style="text-align: right;">Page 60</p> <p>1 had not -- we were sort of looking at these as 2 individual -- individual in our lane, doing our 3 thing: prosecutors prosecuting the cases, ADM 4 treating folks, public health offering 5 services. 6 We did not really identify the one 7 common theme in all of this, which was the 8 flood of prescription opioids into Summit 9 County, until the early teens. 10 Q. The -- when did you do the 11 education in schools through public health and 12 the ADM Board? 13 A. That began -- they -- they have 14 always been in the schools -- 15 Q. Uh-huh. 16 A. -- talking about addiction and 17 prevention and -- and other healthy -- 18 Q. But when did they -- 19 A. -- lifestyle choices. 20 Q. When did they talk about 21 prescription opioids? 22 A. I believe I saw something as early 23 as 2011. I'd -- I'd have to double-check that 24 to be sure. 25 MS. WINNER: I'd like to ask the</p>
<p style="text-align: right;">Page 59</p> <p>1 But even leading up to that, I know 2 that Detective Leonard and some of his 3 colleagues were meeting with emergency room 4 physicians trying to educate them about, you 5 know, sort of what was happening in the street 6 so that -- that those physicians could be 7 aware. 8 Q. So you were seeing -- am I correct 9 of just putting two pieces together, that you 10 were seeing significant criminal activity and 11 other problems relating to abuse of 12 prescription opioids by the late 2000s, but 13 that the public education efforts relating to 14 that did not start until several years later? 15 MS. KEARSE: Object to form. 16 A. I don't think that's true because I 17 know -- I know -- I guess I was thinking 18 specifically about educating physicians. 19 I know that at the time we were 20 already doing some education in schools through 21 public health and through the ADM Board, and 22 the -- the task force did not begin until 2014. 23 So I would say we were seeing an uptick in 24 criminal activity. But again, we still had not 25 really identified the head of the monster. We</p>	<p style="text-align: right;">Page 61</p> <p>1 reporter to mark as Exhibit 4 a document 2 entitled "Ohio Office of Criminal Justice 3 Services 2016 Semiannual Performance Report." 4 Exhibit 3. Just to correct that, it's 5 Exhibit 3. 6 - - - - - 7 (Thereupon, Deposition Exhibit 3, 8 Document Titled "Ohio Office of 9 Criminal Justice Services 2016 10 Semi-Annual Performance Report," 11 SUMMIT000020314 to 000020323, was 12 marked for purposes of 13 identification.) 14 - - - - - 15 Q. Have you ever seen this before? 16 A. I don't -- 17 MS. FLOWERS: Do you have any extra 18 copies, Counselor? 19 MS. WINNER: I don't know if we 20 have any other copies. 21 MS. FLOWERS: Just the one? Okay. 22 A. I don't know that I have seen this 23 before. I don't think I have. 24 Q. The -- the name that appears on the 25 cover page of this is Captain Matt Paolino.</p>

<p style="text-align: right;">Page 62</p> <p>1 A. Sure.</p> <p>2 Q. Do you know who he is?</p> <p>3 A. I do.</p> <p>4 Q. And who is he?</p> <p>5 A. He is the captain in charge of the</p> <p>6 Summit County Drug Unit currently.</p> <p>7 Q. And you see that this is -- at the</p> <p>8 bottom of the first page, it says this is for</p> <p>9 the reporting period of July 1st to December</p> <p>10 31st, 2016?</p> <p>11 A. I see that.</p> <p>12 Q. And then if you turn to the second</p> <p>13 page of the exhibit --</p> <p>14 A. Uh-huh. Yes.</p> <p>15 Q. -- under Question 3, there's a -- a</p> <p>16 question for the number of persons indicted for</p> <p>17 each type of drug.</p> <p>18 A. Okay.</p> <p>19 Q. Do you see that?</p> <p>20 A. I do.</p> <p>21 Q. And the instructions say that it's</p> <p>22 not to include pharmaceuticals. That's a</p> <p>23 separate question. So would --</p> <p>24 A. Okay.</p> <p>25 Q. -- this is just the</p>	<p style="text-align: right;">Page 64</p> <p>1 this.</p> <p>2 Q. I see what you mean. Okay.</p> <p>3 A. So -- so this would be the Summit</p> <p>4 County Drug Unit specifically, because these</p> <p>5 seem rather low. They would not be inclusive</p> <p>6 of the outside agencies' arrests or</p> <p>7 indictments.</p> <p>8 Q. Okay. If you then turn to a couple</p> <p>9 more pages into question, there's a section on</p> <p>10 pharmaceutical diversion. I think it's the --</p> <p>11 one, two -- sixth page into the exhibit.</p> <p>12 A. I see. Fifth, sure.</p> <p>13 Q. And then Question 5 asks for the</p> <p>14 number of people indicted for pharmaceutical</p> <p>15 crimes.</p> <p>16 Do you see that?</p> <p>17 A. I do.</p> <p>18 Q. And then, on that page, and then on</p> <p>19 the following pages, there's figures provided</p> <p>20 for those as well.</p> <p>21 A. Uh-huh. I see that.</p> <p>22 Q. And the numbers of people indicted</p> <p>23 for pharmaceutical crime is considerably</p> <p>24 less --</p> <p>25 A. Sure.</p>
<p style="text-align: right;">Page 63</p> <p>1 non-pharmaceutical drugs.</p> <p>2 A. Okay.</p> <p>3 Q. And then he reports figures for</p> <p>4 indictments for a variety of drugs, including</p> <p>5 cocaine, heroin, marijuana, methamphetamine.</p> <p>6 A. Yes. I see that.</p> <p>7 Q. Do you have any reason to question</p> <p>8 the accuracy of these figures?</p> <p>9 A. I don't have any reason to question</p> <p>10 the accuracy. I would wonder -- this is</p> <p>11 certainly not all cases indicted in Summit</p> <p>12 County. This might be the lead detective was a</p> <p>13 Summit County Drug Unit detective, but this</p> <p>14 would not be reflective of all of the</p> <p>15 trafficking in marijuana or possession of</p> <p>16 marijuana cases in Summit County for that time</p> <p>17 period.</p> <p>18 Q. Well, this is -- does not include</p> <p>19 misdemeanors.</p> <p>20 A. Sure. And -- and -- so there are</p> <p>21 31 communities that make up Summit County, and</p> <p>22 many of them have their own police department,</p> <p>23 and so, you know, whether Hudson or Stow police</p> <p>24 department arrested someone for trafficking in</p> <p>25 marijuana, I assume those are not reflected in</p>	<p style="text-align: right;">Page 65</p> <p>1 Q. -- correct?</p> <p>2 A. Sure. But, again, I don't know --</p> <p>3 I'm sorry. I don't know that I've seen this</p> <p>4 particular report.</p> <p>5 So the -- the Summit County Drug</p> <p>6 Unit task force are not the only Summit County</p> <p>7 officers who make these arrests or provide</p> <p>8 testimony for these indictments. You know,</p> <p>9 there -- there is an entire patrol division who</p> <p>10 have arrest power and who routinely arrest for</p> <p>11 these types of crimes as well.</p> <p>12 That's -- these don't include,</p> <p>13 certainly, the more than 400 police officers</p> <p>14 for the City of Akron and -- and the over a</p> <p>15 thousand police officers we have countywide.</p> <p>16 So, again, I'm not exactly sure what this</p> <p>17 report is produced for, but.</p> <p>18 Q. Well, let me ask you this. Is</p> <p>19 there any reason to think that in those other</p> <p>20 jurisdictions the relative ratio of indictments</p> <p>21 for these other drugs as compared to</p> <p>22 prescription pharmaceuticals is any different?</p> <p>23 A. Is there any reason to think the</p> <p>24 ratio is different? Perhaps, because of the</p> <p>25 number of pharmacies that exist in the city of</p>

<p style="text-align: right;">Page 66</p> <p>1 Akron. It's our most populate, and it's the 2 county seat. It has nearly half the population 3 making up Summit County. 4 So, you know, whereas in some of 5 these smaller jurisdictions there might be one 6 pharmacy, in Akron there are hundreds. So I -- 7 you know, if some of these are -- I see, like, 8 pharmacy technicians, pharmacists, things like 9 that listed, certainly there are -- there are 10 far more pharmacies in Akron and then Barberton 11 and Cuyahoga Falls than there are in, say, for 12 example, Mogadore or Lakemore. 13 Q. Do you think that the amount of 14 felony indictments for crime relating to 15 prescription pharmaceuticals is significantly 16 greater in places that have more pharmacies? 17 A. I -- I -- again, I'm -- I'm not -- 18 I would need a minute to -- to read this report 19 to see what it's looking at. 20 I'm looking at words that are 21 listed on here that says pharmacists, pharmacy 22 techs, and I'm seeing zero. So I'm not sure 23 exactly what this report is or why it was 24 produced, so I would -- because I need to 25 clarify.</p>	<p style="text-align: right;">Page 68</p> <p>1 an attachment to this e-mail. If you can turn 2 a few pages in, at the top it says "National 3 Drug Threat Survey, 2015." 4 A. Okay. 5 Q. Have you seen this before? 6 A. I don't believe I've seen this 7 e-mail. 8 Q. How about the attachment? The 9 National Drug Threat Survey, 2015? 10 A. No, I don't believe I've seen this. 11 Q. And again, the name that is listed 12 here is Matthew Paolino, correct? 13 A. Correct. 14 Q. Do you know what the National Drug 15 Threat Survey is? 16 A. It appears to be -- well, no, not 17 without reading this. I don't know. 18 Q. Okay. If you would turn to the 19 second page of the survey, to -- the answer to 20 Question 1a. 21 A. Okay. 22 Q. And the first question, it says, 23 "Over the past year, has your agency 24 experienced a significant change in a drug 25 trafficking attribute (availability, demand,</p>
<p style="text-align: right;">Page 67</p> <p>1 Q. So you're not familiar with this 2 document? 3 A. I -- I'm sorry. I don't believe 4 I've ever seen it. 5 MS. KEARSE: Is this a good time 6 for a break? 7 MS. WINNER: Sure. 8 THE VIDEOGRAPHER: Off the record 9 at 9:28. 10 (A recess was taken.) 11 THE VIDEOGRAPHER: On the record at 12 9:42. 13 MS. WINNER: I'd like to ask the 14 reporter to mark as Exhibit 4 an e-mail from 15 Matthew Paolino with attachments. The first 16 production number is SUMMIT_000072535. 17 - - - - - 18 (Thereupon, Deposition Exhibit 4, 19 10/6/2014 E-Mail Chain Re: 2015 20 National Drug Threat Survey, with 21 Attachments, SUMMIT_000072535 to 22 000072541, was marked for purposes 23 of identification.) 24 - - - - - 25 Q. And my questions actually relate to</p>	<p style="text-align: right;">Page 69</p> <p>1 distribution, production, transportation) for 2 any of the drugs listed?" 3 Do you see that? 4 A. I do. 5 Q. And then on -- then there are a 6 number of drugs listed, and for each of these 7 categories he had to fill out whether it was 8 increasing, decreasing, the same, or N/A. 9 Do you see that? 10 A. I see -- I see that. 11 Q. And so, for example, for heroin, he 12 put down, "Availability is increasing, demand 13 is increasing, distribution is increasing, 14 transportation is the same." 15 A. I see that. 16 Q. And then a few lines down, for 17 controlled prescription drugs, he's got, 18 "Availability as decreasing, demand is the 19 same, distribution is decreasing, and 20 transportation is the same." 21 Do you see that? 22 A. I do. 23 Q. Do you have any reason to doubt 24 whether he was correct about this? 25 A. No, because we know that the peak</p>

<p style="text-align: right;">Page 70</p> <p>1 of availability of opioid pills in Summit 2 County, I believe, reached its peak in 2012, so 3 certainly there would have been less in 2015. 4 Q. And then, under "Drug availability" 5 in Question 2, do you see that? The level -- 6 A. Yes, I see. 7 Q. -- of availability, he -- he marks 8 for controlled prescription drugs was low. 9 A. Wait. Did you move to Question 2? 10 Q. Question 2. 11 A. Okay. I see. And I'm sorry. 12 The -- say that last part. 13 Q. The availability for controlled 14 prescription drugs, the availability he 15 indicated was low. 16 Do you see that? 17 A. I do see that. 18 Q. And was that correct in 2015, as 19 far as you're aware? 20 A. It was certainly lower than it had 21 been. 22 Q. But do you disagree that it was 23 low? 24 A. I will just certainly say it was 25 lower than it had been. And I think when we</p>	<p style="text-align: right;">Page 72</p> <p>1 years has included -- 2 Q. Drugs other than prescription 3 opioids, correct? 4 A. Yes. 5 Q. It's included heroin, for example? 6 A. Yes. 7 Q. And it's also included fentanyl and 8 carfentanil? 9 A. It has, but those really have -- 10 their prevalence has increased because of the 11 space created by the prescription opioids. 12 Q. But that's -- I mean, that's -- I 13 understand that that's your position. 14 My question is, are, in fact, 15 fentanyl and carfentanil a significant part of 16 the problem? 17 MS. KEARSE: Object to form. 18 A. Significant, I don't -- I don't 19 know how you use the word "significant." 20 To me, carfentanil and fentanyl 21 don't come into Summit County unless the space 22 has been created by 39 million pills in 2012 23 and in 2010. 24 Q. And what's your basis for that? 25 A. Everything I've seen in the last 13</p>
<p style="text-align: right;">Page 71</p> <p>1 look at how readily they were available prior 2 to 2015, it was a marked difference because of 3 the availability of OARRS for use by physicians 4 and pharmacists and law enforcement. 5 So I -- I won't disagree with 6 Paolino, but it was -- I would -- I would 7 certainly believe that that is one of the 8 factors that went into his marking this as low, 9 was because of how much lower it had become. 10 Q. Did you discuss that with him? 11 A. I did not. 12 Q. So you don't know what was in his 13 mind when he marked it as low? 14 A. I don't know what was in his mind 15 when he marked any of the things we've just 16 talked about. 17 Q. Was he qualified to fill out this 18 questionnaire? 19 A. Absolutely. 20 Q. Now, the problem with opioids in 21 Summit County in the last several years has 22 included drugs other than prescription opioids, 23 correct? 24 MS. KEARSE: Object to form. 25 A. The problem in the last several</p>	<p style="text-align: right;">Page 73</p> <p>1 years of public service, everything that I've 2 read in preparation for this deposition today. 3 Q. So that's -- 4 A. There's -- 5 Q. -- that's -- that's an opinion you 6 would have formed based on the things you've 7 read? 8 A. That is an opinion of the County. 9 That is an opinion shared by public health, by 10 ADM, by the executive's office, by everyone who 11 has been impacted by this plague. 12 It is -- it is -- we know that 80 13 percent of our heroin users start with 14 prescription opioids. 15 Q. How do you know that? 16 A. There's research to back it up. 17 The articles that I've read that talk about 18 when folks self-report, in talking with Donna 19 Skoda, in being at Opiate Task Force meetings 20 where the dashboard data is put up on slides 21 that are 10 feet wide to see that when folks 22 are coming in, that's how they've started. 23 Q. Where does the 80 percent number 24 come from? 25 A. The article that I read, it was</p>

<p style="text-align: right;">Page 74</p> <p>1 produced -- it was provided to me by Summit 2 County Public Health, Rich Marountas. I can't 3 recall the title of it. 4 But also there have been 5 presentations done by Dr. Doug Smith, who's 6 deposition I also read -- I remembered that 7 over the break -- from ADM, where he talks 8 about how the receptors in the brain are set up 9 to receive these opioids. 10 And we know that when pills became 11 less available -- less readily available and 12 much more expensive, it created the space for 13 heroin, which created the space for fentanyl 14 and carfentanil. 15 Q. Let me go back. I want to go back 16 to the 80 percent. You said the 80 percent -- 17 you got the 80 percent from an article. Was 18 this an -- what -- do you know the name of the 19 article? 20 A. No. I -- I can't -- I can see it 21 in a binder. I can't recall the name of it. 22 But that's not the first time I've heard it. 23 In fact, that was something that I 24 specifically -- you had asked had I Googled 25 things or anything like that.</p>	<p style="text-align: right;">Page 76</p> <p>1 study that says 80 percent of the people 2 started on prescription opioids? 3 A. The data dashboard that's readily 4 available on Summit County's Public Health 5 reflects that. 6 Q. It specifically reflects 80 percent 7 of the people. They know how 80 percent of the 8 people started. 9 A. That -- as I sit here today, 10 that's -- yes. That's what I believe, yes. 11 Q. And what is the source of 12 information? How do they know that that's how 13 they started? 14 A. Because folks report it. Not every 15 person who comes in for treatment wants to talk 16 about how they started, and, quite frankly, 17 when we're treating people and trying to save 18 lives, we're going to treat them right then. 19 So I know that when Donna was deposed, that 20 that discussion was also had. 21 Q. So there are some people that you 22 know did not start with prescription opioids, 23 correct? 24 A. I don't know anyone who started 25 with heroin.</p>
<p style="text-align: right;">Page 75</p> <p>1 It was a -- it was a very specific 2 discussion I'd had with Donna Skoda and with 3 counsel, frankly, because it was such a -- it 4 was something that I felt so inherently I knew 5 that I wanted to make sure that I had the right 6 statistics and the right research to back that 7 up. Because it's something that certainly we 8 know, and it's one of those things, how do you 9 know you know? But there is research to back 10 that up. 11 Q. Well -- 12 A. And certainly Doug Smith, Donna 13 Skoda, who are experts in the community, agree. 14 Q. Well, does the article -- you don't 15 remember specifically what the article was. Is 16 that article just about -- is it about Summit 17 County specifically? 18 A. No, not specifically. However, 19 Doug and Donna's research backs that up as 20 well. 21 Q. They have -- what is -- what is the 22 nature of their research? 23 A. They treat people. They -- 24 Q. But how did they develop this 80 25 percent statistic? Have they actually done a</p>	<p style="text-align: right;">Page 77</p> <p>1 Q. Well, 80 percent is less than 100 2 percent, correct? 3 A. Correct. Those are people who 4 report. So that 80 percent could just be the 5 20 percent we don't know. Perhaps they did. 6 Perhaps they started with something else. But 7 we can't definitively say what they started 8 with. 9 Q. So -- all right. But it -- you 10 accept that at least it's possible that at 11 least 20 percent of people did not start with 12 prescription opioids? 13 MS. KEARSE: Object to form. 14 A. I know that addiction is a 15 progressive disease, and that it would be 16 incredibly uncommon for someone who had not 17 already become addicted to an opium derivative 18 to go straight to the street and shoot heroin. 19 Q. How many -- how long has there -- 20 has heroin addiction existed in Summit County? 21 A. I'm sure heroin addiction in some 22 form has existed for decades, but certainly not 23 to the level we saw explode in '14, '15 and 24 '16. 25 Q. Okay. But those people who were</p>

<p style="text-align: right;">Page 78</p> <p>1 addicted to heroin in 1980, did they start with 2 prescription opioids? 3 A. I -- I don't know if they did. If 4 you're talking about, you know, folks who were 5 using heroin as a result of coming back from 6 Vietnam, that sort of thing, I mean, those are 7 certainly very different. It's a very 8 different environment. 9 Q. Is the -- what about people who 10 were addicted to heroin in 1992? Did they 11 start with prescription opioids? 12 A. I don't know. 13 Q. How about people who were addicted 14 to heroin in 2000? Were they -- did they start 15 with prescription opioids? 16 A. I'm sure a large portion did, 17 because that is after prescription opioids were 18 being directly marketed to physicians and 19 consumers. 20 Q. Do you have any other reason for 21 believing that -- giving me a different answer 22 as to 199- -- for -- a different answer for 23 1992 than you did for 2000? 24 MS. KEARSE: Object to form. 25 A. Can -- I don't think I understand</p>	<p style="text-align: right;">Page 80</p> <p>1 dive is taken as far as, did you get it from 2 your doctor or did you get it through 3 diversion? I mean, certainly the argument can 4 be made that anybody who did get it from a 5 doctor, whether they got good information about 6 how addictive it was, whether they could, you 7 know, form a habit from it, I -- I don't know. 8 Q. Okay. Just to be clear, because 9 you sort of wandered around a little bit with 10 that answer, you do not know what percentage of 11 the people who become addicted to prescription 12 opioids started with a prescription they got 13 from their doctor? 14 MS. KEARSE: Object to form. 15 A. I do not know. 16 Q. What percentage of overdoses over 17 the past five years in Summit County have been 18 of people overdosing on prescription opioids? 19 A. On prescription opioids? 20 Q. Yes. 21 A. I don't know the exact percentage. 22 Q. It's pretty small, is it not? 23 MS. KEARSE: Object to form. 24 A. Pretty small I don't think is a 25 fair estimate. If it was your family member,</p>
<p style="text-align: right;">Page 79</p> <p>1 what you're asking. 2 Q. Well, I asked you how the -- I 3 asked you about people in 1992, and you said 4 you didn't know. And I asked you about people 5 in 2000, did they start with prescription 6 opioids, and you said you were sure a large 7 portion did because -- because of the marketing 8 that had occurred. 9 Is there any other reason that you 10 have for -- for giving me a different answer as 11 to 2000 than for 1992? 12 MS. KEARSE: Object to form. 13 A. I don't -- I don't know. I don't 14 know how to answer that question. 15 Q. Okay. Now, of the people who 16 started with prescription opioids, what 17 percentage of those started with opioids that 18 they were prescribed by a doctor themselves? 19 A. How many -- how many people started 20 with an opioid that a doctor prescribed them? 21 Is that what you're asking? 22 Q. To them. 23 A. To them. 24 Q. To them. 25 A. I don't know that that deep of a</p>	<p style="text-align: right;">Page 81</p> <p>1 it would certainly be far too much. 2 Q. Well, any -- I'm sure we'll agree 3 any is too many. 4 A. Agreed. 5 Q. But is the -- the vast majority of 6 overdoses have been on heroin, fentanyl, and 7 carfentanil, correct? 8 A. And I would classify those as 9 overdoses on opioids. 10 Q. Okay. But the opioids on which 11 people have overdosed have been heroin, 12 fentanyl, and carfentanil, correct? 13 MS. KEARSE: Object to form. 14 A. Not all of them. But there -- 15 there was a huge influx of fentanyl and 16 carfentanil that killed hundreds of Summit 17 County residents. 18 Q. Do you -- but you do not know 19 what -- what the percentage of the total is of 20 heroin, fentanyl, and carfentanil? 21 A. I do not know the percentage. 22 Q. But it's well over half, correct? 23 MS. KEARSE: Object to form. 24 A. I've said I don't know the 25 percentage.</p>

<p style="text-align: right;">Page 82</p> <p>1 I know that Dr. Kohler and 2 Dr. Sterbenz talked in their depositions about 3 the increases and -- and the percentages, but 4 as I sit here today, I can't tell you the 5 number. 6 Q. Now, when you read Commander 7 Paolino's deposition, did you see his testimony 8 that the greatest drug threats to Summit County 9 today are heroin, fentanyl, crystal meth, and 10 cocaine? 11 A. I did read that. 12 Q. And is -- was that testimony 13 correct? 14 A. I think from a law enforcement 15 perspective, yes. But I think holistically 16 prescription opioids still pose an incredibly 17 dangerous threat to the Summit County 18 community, because there is still this inherent 19 trust that if it comes from the doctor, it 20 can't hurt me. And -- and that -- from a law 21 enforcement perspective, I believe Captain 22 Paolino certainly is qualified and certainly 23 sees day to day what his troops see out there. 24 But I think that is a law enforcement 25 perspective that is looking at what's in front</p>	<p style="text-align: right;">Page 84</p> <p>1 whatever it is that's opioids, what percentage 2 of those are people who, at the time they're 3 seeking addiction treatment, are using heroin? 4 A. I don't know the answer to that. I 5 sort of, as we discussed before, classify all 6 the opioids together. 7 Q. Do you view prescription opioids as 8 a cause of the problem with methamphetamine? 9 MS. KEARSE: I'll object to form. 10 A. It would be unfair to say that 11 Summit County didn't have methamphetamine 12 before opioids became the crisis that they are, 13 but the resurgence we have seen of 14 methamphetamines recently is certainly related 15 to the opioid crisis. 16 Folks who are suffering with 17 addiction become streetwise, and they know that 18 their friends are dying of fentanyl, 19 carfentanil, opioid overdose, and so they try 20 to seek different routes. They are still 21 interested in getting high. They still don't 22 want to go into withdrawal. They don't want to 23 be the sickest they've ever felt, and so they 24 choose different drugs, and oftentimes we're 25 seeing now methamphetamines, cocaine, even</p>
<p style="text-align: right;">Page 83</p> <p>1 of them right now. 2 As we take a step back with ADM, 3 with Summit County Public Health, there is 4 still a grave risk of addiction that exists 5 every time an opioid is prescribed for 6 something that's outside of -- of cancer 7 patients and -- and those folks that we know 8 with acute pain after surgery, something like 9 that. 10 Q. What percentage of people in Summit 11 County pursuing addiction treatment are 12 using -- are not -- strike that. 13 What percentage of the people 14 seeking substance abuse treatment for opioids 15 are using heroin? 16 A. I -- the last slide that I saw, it 17 was -- it was very close. It was 48 or 52 18 percent were using opioids. I can't remember 19 which way. But it -- approximately half are 20 using opioids. 21 Q. So that is of the total, and so the 22 rest would be, like, cocaine or other, meth? 23 A. That would be the assumption. 24 Alcohol certainly still continues to be -- 25 Q. Of that 40-something, 48 or 52 or</p>	<p style="text-align: right;">Page 85</p> <p>1 marijuana laced with "fill in the blank," 2 fentanyl, carfentanil, heroin, morphine. 3 Q. And, in fact, sometimes it happens 4 the other direction, that there's sometime 5 people who are addicted to methamphetamine who 6 will switch to heroin, correct? 7 A. Yes, I think that's fair. 8 Q. And sometimes there are people who 9 are addicted to cocaine who will switch to 10 heroin, correct? 11 A. I -- I have not heard that just 12 sort of anecdotally, because they're such 13 different drugs that produce such different 14 results. It would surprise me to find people 15 who switch in that -- in that way. 16 Q. Do you know that that hasn't 17 happened? 18 A. I don't. It would just surprise 19 me. 20 Q. The -- now, you referred earlier to 21 sort of the mixing of drugs. There are -- 22 there -- there are situations where dealers or 23 their suppliers will mix fentanyl or even 24 carfentanil in with other drugs that are 25 supplied to people, correct?</p>

<p style="text-align: right;">Page 86</p> <p>1 A. Yes.</p> <p>2 Q. And often the people who buy the</p> <p>3 drugs do not know that that has happened,</p> <p>4 correct?</p> <p>5 A. That's correct. That's why we</p> <p>6 started providing fentanyl strips at our Summit</p> <p>7 County Public Health department.</p> <p>8 Q. And so sometimes somebody, you</p> <p>9 know, might buy some heroin from their dealer</p> <p>10 and not know that that heroin is -- is laced</p> <p>11 with fentanyl, and that leads to an overdose,</p> <p>12 correct?</p> <p>13 A. That can happen, yes.</p> <p>14 Q. And it's happened a fair amount,</p> <p>15 has it not?</p> <p>16 A. I'm sure.</p> <p>17 Q. There are also times people buy --</p> <p>18 have bought cocaine from their dealer that has</p> <p>19 been laced with fentanyl that they have not</p> <p>20 been aware of, correct?</p> <p>21 A. Correct. It's an unregulated</p> <p>22 industry.</p> <p>23 Q. So sometimes people who end up</p> <p>24 overdosing on an opioid may not even realize</p> <p>25 that they purchased an opioid, correct?</p>	<p style="text-align: right;">Page 88</p> <p>1 bit, but -- but there's a little bit of overlap</p> <p>2 in some of these. So --</p> <p>3 MS. KEARSE: Yeah. But if it's --</p> <p>4 if it's -- just for the record, if it's -- if</p> <p>5 there's dollars, costs, anything with that,</p> <p>6 that's Brian Nelson who's been designated, and</p> <p>7 not Ms. Johnson.</p> <p>8 MS. WINNER: I'd like to ask the</p> <p>9 reporter to mark as Exhibit 5 a document titled</p> <p>10 "Media Release," January 25, 2006.</p> <p>11 - - - -</p> <p>12 (Thereupon, Deposition Exhibit 5,</p> <p>13 1/25/2006 Media Release, "Heroin</p> <p>14 Users Face Potentially Fatal</p> <p>15 Ingredient," SUMMIT_000350711 to</p> <p>16 000350712, was marked for purposes</p> <p>17 of identification.)</p> <p>18 - - - -</p> <p>19 Q. Have you seen this before?</p> <p>20 A. I have.</p> <p>21 Q. And Drew Alexander was the sheriff</p> <p>22 of Summit County at the time; is that correct?</p> <p>23 A. Yes, he was.</p> <p>24 Q. And do you see here that there is a</p> <p>25 warn- -- there's issuing a warning about heroin</p>
<p style="text-align: right;">Page 87</p> <p>1 MS. KEARSE: Object to form.</p> <p>2 A. Yeah, I -- I suppose that's fair.</p> <p>3 They may not have known. Yes, that's fair.</p> <p>4 Q. Has there ever been an effort, to</p> <p>5 your knowledge, undertaken to quantify how much</p> <p>6 Summit County has spent addressing criminal</p> <p>7 activity involving drugs that are not opioids?</p> <p>8 A. I don't know that -- that that has</p> <p>9 been parsed out. Certainly before we reached</p> <p>10 an epidemic crisis, you could look at what we</p> <p>11 were spending on indigent defense and</p> <p>12 treatment, but I -- I don't know that that's</p> <p>13 been quantified.</p> <p>14 MS. KEARSE: And, Counsel, I</p> <p>15 just -- I know we're not talking topic to</p> <p>16 topic, but I think the damages and the costs</p> <p>17 associated with the epidemic is with Brian</p> <p>18 Nelson as a 30(b).</p> <p>19 MS. WINNER: That's my</p> <p>20 understanding.</p> <p>21 MS. KEARSE: Yeah. So I just want</p> <p>22 to make sure that it's -- I'm not going to say</p> <p>23 what topic you're on, but I think that's --</p> <p>24 going much more into that is really off topic.</p> <p>25 MS. WINNER: I'm floating around a</p>	<p style="text-align: right;">Page 89</p> <p>1 mixed with fentanyl?</p> <p>2 A. Yes.</p> <p>3 Q. So this is a problem that was seen</p> <p>4 in the mid-2000s, correct?</p> <p>5 A. Well, I don't know that that's a</p> <p>6 fair characterization because this -- this</p> <p>7 specifically talks about Northeast Ohio. Our</p> <p>8 Summit County Drug Unit certainly corresponds</p> <p>9 and interacts with task force officers all over</p> <p>10 the state, so to say that it was a problem in</p> <p>11 Summit County I think mischaracterizes this, or</p> <p>12 could, because it certainly doesn't say that</p> <p>13 anyone died or that they found fentanyl in</p> <p>14 Summit County, but just in Northeastern Ohio.</p> <p>15 So I -- I don't know what incident</p> <p>16 brought this about, but I -- I don't believe</p> <p>17 that it's fair to characterize that it was a</p> <p>18 problem in Summit County in 2006.</p> <p>19 Q. Do you know whether it -- it was or</p> <p>20 wasn't?</p> <p>21 A. I -- I was a prosecutor in 2006,</p> <p>22 and I never had a fentanyl case in 2006. I</p> <p>23 don't ever recall hearing of a fentanyl case in</p> <p>24 2006.</p> <p>25 Q. Do you know that there were none?</p>

<p style="text-align: right;">Page 90</p> <p>1 A. I don't, but I would be confident 2 that if there were any fentanyl cases, it was 3 less than a handful. 4 Q. Was Summit -- is Summit County 5 considered to be part of Northeastern Ohio? 6 A. It is. 7 Q. Just want to make sure I was right 8 on my geography. 9 A. Sure. 10 Q. Now, here there's discussion here 11 about fentanyl being used as a prescription 12 pharmaceutical. 13 A. Yes. 14 Q. Now, the fentanyl that has been 15 seen in more recent years has been imported 16 from Mexico and China, correct? 17 A. Some of it has. Some of it was -- 18 we were seeing fentanyl patches being cut open 19 and abused. But I -- yes, it is fair to say 20 that there's been an influx of fentanyl, 21 primarily from China, in Summit County. 22 Q. And that -- the fentanyl that's 23 mixed with heroin or with cocaine has been that 24 imported fentanyl, correct? 25 A. I -- I would say by and large. I</p>	<p style="text-align: right;">Page 92</p> <p>1 increase in the supply of heroin in Summit 2 County in recent years, correct? 3 MS. KEARSE: Object to form. 4 A. There's been an increase in supply? 5 Yes, there's also been an increase in demand. 6 Q. But the increase in supply has 7 included changes in the distribution methods 8 used by Mexican drug cartels in Northeastern 9 Ohio, correct? 10 MS. KEARSE: Object to form. 11 A. I mean, the cartels have always 12 used some of the same hierarchy, whether it was 13 cocaine or heroin now. 14 I'm not sure what specifically 15 you're asking, but, you know, I'm aware that -- 16 that some of our drugs have come through the 17 southern border, yes. 18 Q. Well, and the -- the -- the -- the 19 drug traffic organizations have improved their 20 distribution strategies, have they not? 21 They've gotten more efficient just like other 22 businesses. 23 MS. KEARSE: Object to form. 24 A. I don't know. I thought they were 25 pretty good at it before. I mean, it seemed</p>
<p style="text-align: right;">Page 91</p> <p>1 couldn't say in every instance, but by and 2 large it's been imported. 3 Q. Do you know of any instance in 4 which diverted prescription fentanyl has been 5 mixed with heroin or cocaine or other drugs? 6 A. Has -- I know that -- I can recall 7 it being used in conjunction with, like 8 somebody cutting open a patch, and they will 9 eat it and take other pills with it. But as 10 far as like, you know, mixing the compound, I'm 11 not aware of any. 12 Q. And is the carfentanil that has 13 been seen and -- and caused problems in Summit 14 County in recent years, has that been illicit, 15 imported carfentanil? 16 A. Yes. I -- frankly, I don't know 17 that any of us had heard of carfentanil until 18 about 2016. 19 Q. So that's -- that's not something 20 that you have seen diverted pharmaceutical 21 carfentanil for? 22 A. No. It's -- it's used for large 23 animals. Our zoo in Akron doesn't have animals 24 large enough to keep carfentanil. 25 Q. Now, the -- there's been an</p>	<p style="text-align: right;">Page 93</p> <p>1 like I was pretty busy with drug cases. I 2 think they have been in the game long enough 3 that they evolve and adapt like any business 4 does. 5 The desire was not for cocaine. 6 The desire was for an opium high, and that was 7 the market demand, and they adjusted their 8 business strategy to meet that. 9 Q. Is cocaine still a problem in 10 Summit County? 11 A. I think any time cocaine is around 12 it's a problem. 13 Q. Has it -- is it less of a problem 14 than it was? 15 A. I think -- it was different. Opium 16 derivatives and heroin are so different than 17 the cocaine problems we saw in the '90s and 18 2000s, because people are literally dropping 19 dead immediately. And is it -- is it more or 20 less of a problem? I don't know, because all 21 of our attention became 100 percent 22 laser-focused on opioids. 23 Q. So there's no focus anymore on 24 trying to interdict cocaine? 25 A. No. There's always -- there's</p>

<p style="text-align: right;">Page 94</p> <p>1 always officers whose primary responsibilities 2 are to work with the interdiction world, but 3 it's just a different focus. 4 It became so prevalent -- it cannot 5 be overstated how prevalent the opioid crisis 6 discussion was in '14 and '15 and '16. It was 7 the dominant topic in every conversation, 8 whether public or private here. 9 Q. And that was largely because there 10 were a lot of overdoses that were occurring 11 during that time, correct? 12 A. Absolutely. 13 Q. And -- and that was in large part 14 because of the problem with fentanyl being 15 mixed in with the heroin and carfentanil? 16 MS. KEARSE: Object to form. 17 A. I would suggest that those were 18 opioid overdoses. That that space, again, was 19 created by the 39 million pills per year that 20 were coming into our community. 21 Fentanyl doesn't find its way here 22 unless the demand is here, and that demand was 23 created by an addicted population brought about 24 by opioid prescriptions. 25 Q. I'm not asking you to trace</p>	<p style="text-align: right;">Page 96</p> <p>1 have not reviewed every autopsy of the people 2 we lost, but I would -- I would assume that 3 some of them also had prescription opioids in 4 their system as well. 5 Q. But you don't know what percentage 6 were? 7 A. I don't. 8 Q. Are you familiar with the term 9 "diversion" as it relates to prescription 10 pharmaceuticals? 11 A. I am. 12 Q. And what does diversion mean? 13 A. Diversion means the -- obtaining or 14 using prescription medications outside of the 15 sort of medically recommended or legal uses. 16 Q. Is -- 17 A. It's the -- it's the way that pills 18 get into our community, sort of outside of the 19 original intended use. 20 Q. Is diversion a crime? 21 A. It -- yes. 22 Q. Are there any situations when it's 23 not a crime? 24 A. No. 25 Q. Is it common for pills that have</p>
<p style="text-align: right;">Page 95</p> <p>1 everything back in history. I'm asking you 2 what was it that was causing people to perk up 3 and pay attention, in -- in the period 2014, 4 '15, '16, and that was because people were 5 overdosing, correct? 6 MS. KEARSE: Object to form. 7 A. People were sitting up and paying 8 attention because we all started to see things 9 in our lane. Prosecutors were seeing their 10 lane. ADM was seeing their lane. Hospital was 11 seeing their lane. ER visits were up. And we 12 all started to come together to say, you know, 13 how is this going on and how -- how do we treat 14 this community issue? 15 Not the least of which was that we 16 had thousands -- we lost thousands of people in 17 that time period. 18 Q. And those were the people who were 19 overdosing on heroin and fentanyl, correct? 20 A. Those were the people who were 21 overdosing on opioids. 22 Q. But the opioids they were 23 overdosing on were heroin and fentanyl, were 24 they not? 25 A. Those were two of the drugs. I</p>	<p style="text-align: right;">Page 97</p> <p>1 been diverted to pass through multiple hands 2 before they reach the user? 3 A. Multiple hands? 4 Q. Multiple people. 5 MS. KEARSE: Object to form. 6 A. Like doctor, pharmacist, patient? 7 Q. Well, diversion -- after -- after 8 the diversion first occurs until the user who 9 consumes it, are there often -- 10 A. I see what you're saying. 11 Q. -- multiple steps in there? 12 A. So diversion can occur with the 13 original patient. I mean, certainly diversion 14 can occur if I'm someone who is addicted and my 15 doctor will no longer prescribe to me and I go 16 to another doctor, that's diversion as well. 17 So -- so in that case, no. 18 In other cases, I don't know the 19 answer to that. It's not something I've 20 considered before. 21 Q. All right. Well, I'd like to talk 22 about some of the ways that diversion does 23 occur. 24 A. Uh-huh. 25 Q. And I think we've already talked</p>

<p style="text-align: right;">Page 98</p> <p>1 about some of them. One of them you talked 2 about just now. I think it's referred to as 3 doctor shopping, correct? 4 MS. KEARSE: Object to form. 5 A. I've heard it called that, yes. 6 Yeah. Or hopping. 7 Q. What is doctor shopping or doctor 8 hopping? 9 A. It's when an individual typically 10 has a prescription from their doctor, and 11 typically for opioid, and at some point either 12 becomes so addicted that their prescribed 13 dos- -- dosage no longer keeps them from 14 becoming pill sick, or their doctor has said, 15 you know, there's no reason -- this was 16 post-surgical, or something like that, or they 17 don't have a primary care physician, and so 18 they seek to get more opioids from another 19 doctor than the one they originated with. 20 Q. Is doctor -- did doctor shopping or 21 doctor hopping occur for other drugs, like 22 Xanax or... 23 A. I'm sure that it did. I -- I don't 24 recall -- I don't recall any specific instances 25 where I would say I'd seen that, but I'm -- I'm</p>	<p style="text-align: right;">Page 100</p> <p>1 A. Well, I think with better 2 education. It might not prevent them on that 3 particular day, but perhaps if accurate 4 information had been provided by the 5 manufacturers to distributors and doctors, 6 perhaps that first initial prescription 7 wouldn't have been written. So, you know -- 8 Q. So anything else that -- that a -- 9 well, I've asked you specifically not about the 10 manufacturer, but about a distributor. What -- 11 what can a dis- -- what can a distributor do to 12 stop doctor shopping? 13 A. Well, I -- I think when they see 14 that -- because doctor shopping isn't just 15 limited to somebody who's looking for two 16 different doctors. You can be looking for that 17 one special doc who everybody knows -- 18 Q. Uh-huh. 19 A. -- will fill the script. And I 20 think distributors have and do have the 21 responsibility of identifying when, you know, 22 there are certain doctors who are writing 23 hundreds of scripts. Like we -- we did have a 24 couple of those in Summit County. 25 Q. Do distributors interact directly</p>
<p style="text-align: right;">Page 99</p> <p>1 sure that it did. 2 Q. Well, talking about doctor 3 shopping, let's limit it to opioids for right 4 now. Who has the power to prevent it from 5 happening? 6 A. Well, certainly the person who 7 writes the prescription, if they are accessing 8 OARRS, so the -- the physician. 9 Pharmacists who have access to 10 OARRS. 11 But, again, having dealt with an 12 addicted population to crack, to 13 methamphetamine, cocaine -- if you believe or 14 not, people can be addicted to marijuana -- 15 opioid addicts are far more clever and are far 16 more committed than any other addicted 17 population I've seen. 18 So prevention, there are -- there 19 are guardrails that should be in place, but 20 these folks are very committed. And frankly, 21 you know, I think the other people that could 22 have intervened are certainly the manufacturers 23 and distributors. There were -- 24 Q. Well, how is a distributor going to 25 prevent doctor shopping?</p>	<p style="text-align: right;">Page 101</p> <p>1 with doctors? 2 A. Their reps do. 3 Q. Distributors, or pharmaceutical -- 4 or manufacturers? 5 A. I guess I hadn't thought about it 6 that way. I suppose it's manufacturers. I -- 7 I -- I guess I hadn't really thought of it in 8 that terms. 9 Q. Well, let's -- another kind of 10 diversion occurs when people still -- still -- 11 steal pills, correct? 12 A. Yes. 13 Q. And sometimes they will -- may rob 14 a pharmacy or a hospital. 15 A. Yes. 16 Q. Who has the power to prevent that 17 from happening? 18 A. I mean, crime prevention in 19 general? I don't -- I don't know who -- I 20 don't know who has the power to prevent a 21 robbery from occurring. 22 Q. There's also a theft just from 23 individuals from friends or from family 24 members? 25 A. Correct.</p>

<p style="text-align: right;">Page 102</p> <p>1 Q. And would your answer be the same</p> <p>2 as -- if I asked you who has the power to</p> <p>3 prevent that from happening?</p> <p>4 A. No, it wouldn't be.</p> <p>5 Q. Okay.</p> <p>6 A. Because there was so much</p> <p>7 overprescribing based on bad information, that,</p> <p>8 you know, an incident that probably could have</p> <p>9 been handled with a three- or five-day supply,</p> <p>10 there was a 30-day supply. And --</p> <p>11 Q. So if doctors --</p> <p>12 A. -- you know, I -- I --</p> <p>13 Q. I'm sorry. No, go ahead.</p> <p>14 A. You had asked earlier. I have</p> <p>15 taken an opioid post-surgery, but I've never</p> <p>16 taken the whole bottle. And I think that</p> <p>17 that's reflective of so many folks in our</p> <p>18 community who take a couple, feel better, and</p> <p>19 then they stay in the medicine cabinet, and --</p> <p>20 and that is -- that is certainly a way that</p> <p>21 pills in Summit County were diverted.</p> <p>22 So perhaps if there had been better</p> <p>23 information about habit forming and addiction</p> <p>24 levels, perhaps those -- those prescriptions</p> <p>25 for 30 days would not have occurred when three</p>	<p style="text-align: right;">Page 104</p> <p>1 prevented the readily available supply. I</p> <p>2 mean, again, I -- it's such a big number to me.</p> <p>3 39 million pills. 72 pills for every man,</p> <p>4 woman, and child in Summit County. So they</p> <p>5 were just there. They were so available.</p> <p>6 Q. But sometimes pills were taken from</p> <p>7 people who had legitimate prescriptions for the</p> <p>8 full amount for which they were prescribed,</p> <p>9 correct?</p> <p>10 A. That's correct.</p> <p>11 Q. So it's not always the fault of the</p> <p>12 doctor or anybody else for giving the person</p> <p>13 too many pills --</p> <p>14 MS. KEARSE: Object to form.</p> <p>15 Q. -- is it?</p> <p>16 A. I've not encountered a situation</p> <p>17 where someone stole pills from a sick relative</p> <p>18 when they hadn't already had pills before.</p> <p>19 Q. Okay. But the -- when they steal</p> <p>20 pills from a sick relative, that sick relative</p> <p>21 may have the pills perfectly legitimately.</p> <p>22 A. They may, yes.</p> <p>23 Q. And so the doctor may have done</p> <p>24 exactly the right thing in giving them the</p> <p>25 pills, correct?</p>
<p style="text-align: right;">Page 103</p> <p>1 or five would have sufficed.</p> <p>2 Q. So -- so doc- -- so doctors -- if</p> <p>3 doctors could pre- -- prescribed less, there</p> <p>4 would be less theft?</p> <p>5 A. I think if doctors had the accurate</p> <p>6 information, that they would have acted in that</p> <p>7 fashion.</p> <p>8 Q. Will doctors have the accurate</p> <p>9 information today?</p> <p>10 A. I hope so. I think that's what</p> <p>11 we're trying to make sure of.</p> <p>12 Q. What happened to the rest of your</p> <p>13 pills?</p> <p>14 A. We disposed of them. I -- we</p> <p>15 have -- I worked in the courthouse, and the</p> <p>16 police off- -- officer has a dump box right in</p> <p>17 the -- right when you walk in the door at the</p> <p>18 Akron Police Department.</p> <p>19 Q. There is also a diversion just from</p> <p>20 people giving pills to friends, like kids get</p> <p>21 together and give pills to each other, correct?</p> <p>22 A. That's correct.</p> <p>23 Q. And -- and who has the power to</p> <p>24 prevent that from happening?</p> <p>25 A. Well, again, if we could have</p>	<p style="text-align: right;">Page 105</p> <p>1 A. Correct.</p> <p>2 Q. And the pharmacy may have done</p> <p>3 exactly the right thing in filling that</p> <p>4 prescription, correct?</p> <p>5 A. Correct.</p> <p>6 Q. And the distributor may have done</p> <p>7 exactly the right thing in -- in supplying the</p> <p>8 pills to the pharmacy, correct?</p> <p>9 A. There are residents in Summit</p> <p>10 County who legitimately need and are prescribed</p> <p>11 these pills, yes.</p> <p>12 Q. And -- and the manufacturer that</p> <p>13 manufactured the pills that were given to that</p> <p>14 sick relative didn't do anything wrong in</p> <p>15 giving -- in manufacturing those pills that</p> <p>16 went to that sick relative?</p> <p>17 A. For that particular person --</p> <p>18 MS. KEARSE: Object to form.</p> <p>19 A. -- I -- you know, for that</p> <p>20 particular person, if that's what was</p> <p>21 prescribed appropriately, then, yes.</p> <p>22 Q. And then, when they're stolen but</p> <p>23 they -- when they're stolen, they're then</p> <p>24 diverted, and the person who's at fault is</p> <p>25 whoever stole them, correct?</p>

<p style="text-align: right;">Page 106</p> <p>1 MS. KEARSE: Object to form.</p> <p>2 A. I -- you know, I -- the person who</p> <p>3 is at fault for what?</p> <p>4 Q. All right. Let me just ask. Do</p> <p>5 you think that the person who steals pills from</p> <p>6 somebody else is at fault?</p> <p>7 MS. KEARSE: Object to form.</p> <p>8 A. Yeah. I'm not -- I'm not -- no.</p> <p>9 I'm not going to sort of fall into that</p> <p>10 victim-blaming trap. No. Because these -- I</p> <p>11 have not seen an instance where someone stole</p> <p>12 pills from a sick relative who was not already</p> <p>13 addicted to opioids.</p> <p>14 Q. Has anybody stolen pills from --</p> <p>15 from somebody else, another individual, whether</p> <p>16 they're a sick relative or not, who's been</p> <p>17 prosecuted?</p> <p>18 A. Has -- say that again, please.</p> <p>19 Q. Has a person who's stolen pills</p> <p>20 from another person been prosecuted in Summit</p> <p>21 County?</p> <p>22 A. Stolen pills from another person.</p> <p>23 I mean, we've had robberies, certainly.</p> <p>24 Q. And those people are prosecuted,</p> <p>25 right?</p>	<p style="text-align: right;">Page 108</p> <p>1 just flat out improper prescrib- --</p> <p>2 prescribing. Doctors prescribing pills that</p> <p>3 they know the person doesn't need, correct?</p> <p>4 MS. KEARSE: Object to form.</p> <p>5 A. Yes, there were -- there were</p> <p>6 doctors who were improperly prescribing in</p> <p>7 Summit County.</p> <p>8 Q. And they were -- these were doctors</p> <p>9 who knew they were improperly prescribing?</p> <p>10 A. I think that's fair.</p> <p>11 Q. And some of them were prosecuted,</p> <p>12 correct?</p> <p>13 A. Yes.</p> <p>14 Q. Have you ever heard the term "pill</p> <p>15 mill"?</p> <p>16 A. I have.</p> <p>17 Q. Were there pill mills in Summit</p> <p>18 County?</p> <p>19 A. I think that we had a couple</p> <p>20 that -- depending on what your definition is,</p> <p>21 that were referred to as -- as pill mills, yes.</p> <p>22 Q. Are there pill mills in Summit</p> <p>23 County today?</p> <p>24 A. Not that I'm aware of.</p> <p>25 Q. Who were -- who were the ones</p>
<p style="text-align: right;">Page 107</p> <p>1 A. Yes.</p> <p>2 Q. And they're convicted?</p> <p>3 MS. KEARSE: Object to form.</p> <p>4 A. Yes.</p> <p>5 Q. And are some of the people who --</p> <p>6 well, strike that.</p> <p>7 Another type of diversion that</p> <p>8 occurs is the forgery of prescriptions,</p> <p>9 correct?</p> <p>10 A. That's correct.</p> <p>11 Q. Is that something you saw in the</p> <p>12 prosecutor's office?</p> <p>13 A. It is.</p> <p>14 Q. And so were you, as a prosecutor,</p> <p>15 and the police you worked with, the main people</p> <p>16 who have the power to address that issue?</p> <p>17 A. I -- I think that there was some</p> <p>18 education that could have occurred with the</p> <p>19 pharmacists from, you know, their board. I</p> <p>20 think with the advent of OARRS and sort of the</p> <p>21 understanding that these pills were highly</p> <p>22 addictive started to become more prevalent in</p> <p>23 our community. Physicians, pharmacists, and</p> <p>24 law enforcement began to work together.</p> <p>25 Q. Now, another cause of diversion is</p>	<p style="text-align: right;">Page 109</p> <p>1 that -- that you were aware of?</p> <p>2 A. Yeah. Dr. Bressi, Dr. Heim,</p> <p>3 Dr. Harper stood out as -- you know, they</p> <p>4 were -- they were headline news at the time.</p> <p>5 Q. And these were people who wrote</p> <p>6 prescriptions for large numbers of patients who</p> <p>7 didn't need opioids, but they gave them</p> <p>8 prescriptions for opioids anyway, correct?</p> <p>9 MS. KEARSE: Object to form.</p> <p>10 A. These were doctors who -- will you</p> <p>11 say that part again? I feel like there was a</p> <p>12 couple different questions in that.</p> <p>13 Q. All right. Well, these were</p> <p>14 people -- these were doctors who wrote</p> <p>15 prescriptions for opioids for patients knowing</p> <p>16 that they didn't need them, correct?</p> <p>17 A. I --</p> <p>18 MS. KEARSE: Object to form.</p> <p>19 A. I don't think that "need" -- I</p> <p>20 think that term "need" is tough for me, because</p> <p>21 from the patient's perspective, they needed</p> <p>22 them. They were deeply addicted. And --</p> <p>23 Q. Okay. Let me ask it a different</p> <p>24 way, then.</p> <p>25 A. Okay. Okay.</p>

<p style="text-align: right;">Page 110</p> <p>1 Q. So they -- they wrote --</p> <p>2 MS. KEARSE: Counsel, I'm just --</p> <p>3 she was answering your question.</p> <p>4 MS. WINNER: Okay.</p> <p>5 MS. KEARSE: I believe you just cut</p> <p>6 her off. So --</p> <p>7 Q. I'm sorry. I didn't mean to cut</p> <p>8 you off. I just -- I think maybe you</p> <p>9 misunderstood my question. I wanted to</p> <p>10 rephrase it.</p> <p>11 The -- my -- my question is they</p> <p>12 wrote -- they wrote -- let -- let me put it a</p> <p>13 different way.</p> <p>14 These were people that were</p> <p>15 prosecuted for writing prescriptions to</p> <p>16 patients for which -- for whom the -- the</p> <p>17 prescriptions were improper?</p> <p>18 MS. KEARSE: Object to form.</p> <p>19 A. I think im- -- yeah, "improper"</p> <p>20 is -- is fair. I -- I think that we prosecuted</p> <p>21 doctors who were not following their oath, who</p> <p>22 were -- were writing prescriptions to, albeit</p> <p>23 sick individuals, but should have intervened in</p> <p>24 a different way.</p> <p>25 Q. In fact, it wasn't just wrong what</p>	<p style="text-align: right;">Page 112</p> <p>1 Q. So people who are engaged in</p> <p>2 diversion include medical professionals,</p> <p>3 correct?</p> <p>4 MS. KEARSE: Object to the form.</p> <p>5 A. You mean the doctors who were</p> <p>6 prescribing?</p> <p>7 Q. Well, sometimes it's maybe doctors</p> <p>8 who were prescribing. Sometimes it may be</p> <p>9 doctors or nursing -- nurses or others who are</p> <p>10 stealing --</p> <p>11 A. I see.</p> <p>12 Q. -- drugs, correct?</p> <p>13 A. I see. We did have instances, yes,</p> <p>14 of that.</p> <p>15 Q. Dentists have also been involved in</p> <p>16 diversion?</p> <p>17 MS. KEARSE: Object to form.</p> <p>18 A. I -- I'm not aware of -- well, are</p> <p>19 you asking are there, you know, like, bad</p> <p>20 dentists in Summit County?</p> <p>21 Q. Yes.</p> <p>22 A. I -- I don't know that -- I don't</p> <p>23 know of -- of a dentist we've prosecuted. I'm</p> <p>24 sure that there has been diversion in a dentist</p> <p>25 office through someone seeking opioids, but</p>
<p style="text-align: right;">Page 111</p> <p>1 they were doing, it was criminal what they were</p> <p>2 doing, correct?</p> <p>3 A. There's no question. But, you</p> <p>4 know, at the same time, these doctors were</p> <p>5 still being called upon by reps. I mean, we</p> <p>6 certainly have seen that through the discovery</p> <p>7 process the number of times -- you know, it's</p> <p>8 not to excuse the -- the behavior of these</p> <p>9 docs, certainly, but they definitely had a</p> <p>10 partner in that crime.</p> <p>11 Q. But they knew that what they were</p> <p>12 doing was -- was illegal, correct?</p> <p>13 MS. KEARSE: Object to form.</p> <p>14 A. I -- I think that they did, yes.</p> <p>15 Q. All right. Is any of the -- are</p> <p>16 any of the diverted prescription opioids sold</p> <p>17 in Summit County smuggled in from Canada?</p> <p>18 A. I don't know the answer to that. I</p> <p>19 don't think we really had a need. We had</p> <p>20 almost 40 million pills a year, so I -- it's</p> <p>21 not something I ever encountered.</p> <p>22 Q. But you don't know how many pills a</p> <p>23 year came in from Canada?</p> <p>24 A. Not into Summit County, I do not.</p> <p>25 Certainly not illegally.</p>	<p style="text-align: right;">Page 113</p> <p>1 I -- I don't -- I'm not familiar if we had a</p> <p>2 dentist.</p> <p>3 Q. Has every medical professional</p> <p>4 who's been suspected of diversion been</p> <p>5 prosecuted?</p> <p>6 A. Suspected? I'm sure not.</p> <p>7 Q. Why not?</p> <p>8 A. At the time? Are -- I guess I</p> <p>9 should ask you to -- to be specific. Are you</p> <p>10 asking if every doc who we thought was, you</p> <p>11 know, acting outside of their oath was -- are</p> <p>12 you asking if every doc who was duped by</p> <p>13 somebody seeking a pill that they should not</p> <p>14 have been seeking?</p> <p>15 Q. I'm asking you if -- if -- if every</p> <p>16 doctor that you suspected might be knowingly</p> <p>17 writing improper prescriptions was prosecuted?</p> <p>18 A. I don't think so.</p> <p>19 Q. Why?</p> <p>20 A. Because the access to OARRS at the</p> <p>21 time was so incredibly limited. The way that</p> <p>22 doctors were originally prosecuted was really</p> <p>23 an officer or detective driving from pharmacy</p> <p>24 to pharmacy to pharmacy and trying to interview</p> <p>25 patients. And quite frankly, nobody wants to</p>

<p style="text-align: right;">Page 114</p> <p>1 rat out their doc, especially when they're 2 deeply addicted to opioids. 3 So to suspect a doctor is one 4 thing. To be able to put that case together, 5 really almost impossible because the lack of 6 cooperation that you need from the patients, 7 because there was such limited access to OARRS 8 at the time. I'm sure that there were some 9 that we missed. 10 Q. Are there situations where it's not 11 a bright line as to whether a prescription was 12 written improperly or not? 13 MS. KEARSE: Object to form. 14 A. I know that there were doctors who 15 were given information that said these are 16 folks -- you know, these are the right kind of 17 patients who aren't going to get addicted. And 18 I think that's bad information for the docs to 19 act on. 20 So the bright line, was it an 21 improper prescription? Perhaps. However, the 22 doc was acting in good faith. 23 Q. Well, leaving aside whether the 24 doctor had good -- let's assume it's today when 25 a doctor -- and a doctor has good information.</p>	<p style="text-align: right;">Page 116</p> <p>1 the board of pharmacy to try to get licenses 2 lifted for people who are involved in 3 diversion? 4 A. That did occur. 5 Q. When did it occur? 6 A. I recall it occurring in the late 7 2000s. Certainly when I was a prosecutor I 8 recall there being some nursing licenses that 9 were in question. 10 Q. And who -- how did that work? 11 Did -- did somebody reach out to the -- to the 12 board? 13 A. Typically the board already knew, 14 because, frankly, the nurses tended to 15 self-report. As soon as the diversion occurred 16 and they were -- they first encountered law 17 enforcement, they -- there was, by and large, 18 self-reporting. 19 Q. In your view, did the medical 20 board -- just focusing just on the medical 21 board -- did the medical board do enough to 22 regulate doctors who were involved in this? 23 MS. KEARSE: Object to form. 24 A. I don't feel like I can make that 25 judgment. I'm -- I'm not familiar with what</p>
<p style="text-align: right;">Page 115</p> <p>1 Is law enforcement always able to fully 2 evaluate whether the doctor has properly -- 3 A. No. We're -- 4 Q. -- made a prescription? 5 A. Law enforcement is not trying to 6 put itself, and neither is the County, in the 7 shoes of a physician. I mean, we still want to 8 allow doctors to treat their patients. 9 Q. And whether to prescribe opioids or 10 not to a particular patient is often a judgment 11 call, is it not? 12 A. Yes, because pain is self-reported. 13 Q. And different doctors have -- may 14 have different judgments about the appropriate 15 way to treat pain for a particular patient, 16 correct? 17 A. Absolutely. 18 Q. Do you know how many nurses have 19 been prosecuted for diversion? 20 A. The exact number, no, but I recall 21 reading in Brad Gessner's deposition, like, 22 half a dozen in one particular year or one 23 particular span of time that he talked about. 24 Q. Does Summit County ever work with 25 the board of nursing or the medical board or</p>	<p style="text-align: right;">Page 117</p> <p>1 the medical board did at that time. 2 Q. Do you have a view about whether 3 the nursing board did enough? The board of 4 nursing did enough? 5 A. Again, I -- what they were doing to 6 regulate their folks, I mean, I think looking 7 back, we criminalized addiction at that time, 8 and we still do today. And if -- if I could go 9 back, I would go back with a different mindset 10 of rather than creating a felon out of this 11 situation, trying to figure out what caused it 12 and -- and trying to put that person in a 13 better position to be in recovery rather than 14 taking away their means to provide treatment. 15 You know, their means to put food on their own 16 table. 17 Q. My question was, did you have a 18 view about whether the board of nursing did 19 enough to combat diversion? 20 A. I don't know what the board of 21 nursing did at that time. 22 MS. WINNER: I'd like to ask the 23 reporter to mark as Exhibit 6 a document titled 24 "Summit County and the City of Akron, Ohio, 25 Plaintiff's Supplemental Responses and</p>

<p style="text-align: right;">Page 118</p> <p>1 Objections to Distributor Defendants' 2 Interrogatory No. 3, as Rewritten by Special 3 Master David Cohen." 4 - - - - - 5 (Thereupon, Deposition Exhibit 6, 6 Summit County and City of Akron, 7 Ohio Plaintiff's Supplemental 8 Responses and Objections to 9 Distributor Defendants' 10 Interrogatory Number 3 As Rewritten 11 by Special Master David Cohen, was 12 marked for purposes of 13 identification.) 14 - - - - - 15 Q. Have you seen this before? 16 A. I have. 17 Q. Was this one of the documents you 18 reviewed in preparing for this deposition? 19 A. It is -- look through it -- yes. I 20 recognize that. 21 Q. Okay. If you would turn to page 22 5 -- 23 A. Uh-huh. 24 Q. -- we'll skip over the objections 25 for now -- it asks to identify those pharmacies</p>	<p style="text-align: right;">Page 120</p> <p>1 Q. My question is, do you know 2 anything -- do you know anything about these 3 two pharmacies or their involvement in 4 diversion beyond what is in this interrogatory 5 response? 6 A. About -- no, I do not. 7 Q. All right. If you would then turn 8 a few more pages in to page 8. At the top of 9 that page, it says, "Based upon data made 10 available to Summit County and the City of 11 Akron through the Court's order concerning 12 ARCOS data, Plaintiff has identified the 13 following pharmacies as having placed 14 suspicious orders during the relevant time 15 frame." 16 Do you see that? 17 A. I do, uh-huh. 18 Q. Do you know whether any of the 19 pharmacies that are then listed on this list 20 have been investigated for diversion? 21 A. Oh, I don't know. Like a detective 22 went and -- is that what you're asking? 23 Q. Whether anything was done to -- to 24 look into anything involving any of these 25 pharmacies?</p>
<p style="text-align: right;">Page 119</p> <p>1 within your geographical boundaries that you 2 investigated for or learned were being 3 investigated for or learned were engaged in 4 possible diversion or wrongful prescription of 5 prescription opioids during the time frame. 6 And then if you go down below, there's a list 7 of two pharmacies. 8 A. Yes. 9 Q. Are you familiar with these two 10 pharmacies? 11 A. I mean, I've seen this document. 12 I'm not familiar with -- I've never been to 13 either one of these pharmacies. 14 Q. Okay. Do you know what -- the 15 first of these, what -- what the wrongdoing was 16 that was investigated entailed? 17 A. I believe this was -- no. I don't 18 want to guess. I -- I don't know. I mean, I 19 could read through this again more closely if 20 it's detailed in here. 21 Q. It's not. 22 A. Okay. Okay. 23 Q. At least not that I -- not that I'm 24 aware of. 25 A. No. Okay.</p>	<p style="text-align: right;">Page 121</p> <p>1 A. Well, no. I don't think we had 2 that data until the Judge released it. 3 Q. But apart from -- apart from that 4 data, do you know whether any of these 5 pharmacies have ever been investigated for 6 involvement in diversion? 7 MS. KEARSE: Object to form. 8 A. I -- I mean, I'm -- I'm confident 9 some of these pharmacies were part of criminal 10 investigations when somebody was, you know, 11 seeking to pass a forged script or something 12 like that. I mean, there's -- but I -- I don't 13 know specifically that anybody has investigated 14 these pharmacies, from law enforcement 15 perspective. 16 Q. Do you know whether, apart from 17 whatever analysis was done of the ARCOS data, 18 Summit County has any reason to believe that 19 any of these pharmacies dispensed 20 pharmaceuticals improperly? 21 MS. KEARSE: Object to form. 22 A. Well, certainly as they were listed 23 in the response, I'm confident that our counsel 24 and the experts have determined, based on the 25 ARCOS data, that there was some involvement,</p>

<p style="text-align: right;">Page 122</p> <p>1 whether it was a fail to report or stop a 2 suspicious order. 3 Q. I'm talking about the pharmacies. 4 Is there anything any of these pharmacies is 5 believed to have done wrong with prescription 6 opioids that they ordered? 7 A. The pharmacies that are listed are 8 our representation of pharmacies we believe 9 have placed suspicious orders. 10 Q. But you would agree, as a former 11 prosecutor, that there's a difference between a 12 suspicion of wrongdoing and actual wrongdoing, 13 correct? 14 MS. KEARSE: Object to form. 15 A. I mean, sure. There's also 16 different burdens of proof, and, you know, the 17 criterion that we looked at for -- or were 18 asked to provide, I think, informed some of our 19 decisions about what we looked at. 20 Q. But my question is, do you -- apart 21 from whatever analysis that was done with the 22 ARCOS data to come up with this list -- 23 A. Oh, okay. 24 Q. -- do you know of any- -- anything 25 else that Summit County is aware of indicating</p>	<p style="text-align: right;">Page 124</p> <p>1 pharmacy necessarily mean that there was 2 anything wrong going on? 3 MS. KEARSE: Object to form. 4 A. Outside of -- of the guardrails of 5 reporting, I know that we've learned, through 6 the discovery process, that there were -- there 7 was at least a pharmacy that always kept on 8 hand a greater number of opioids due to its 9 proximity to one of our sort of nefarious docs. 10 So the reporting requirements of the 11 pharmacies, I think, are in question. 12 That's -- that's the way I understand it. 13 Q. What's the pharmacy you were just 14 referring to? 15 A. I believe there was a Rite Aid. I 16 don't -- yeah. I would guess it's this one on 17 Waterloo Road. 18 Q. You would guess or you know? 19 A. I don't know. You know what? I'm 20 not going to say. I know -- I know that it was 21 a Rite Aid in proximity to one of the docs. 22 Q. But there might also -- there might 23 also be a pharmacy that's in proximity to a 24 hospice prescriber, correct? Than -- 25 A. Sorry. I got distracted by the</p>
<p style="text-align: right;">Page 123</p> <p>1 that any of these pharmacies did anything wrong 2 with the prescription opioids that they 3 ordered? 4 A. Apart from the ARCOS data, I am not 5 aware of anything, no. 6 Q. Do you know how it was determined, 7 based on the ARCOS data, that these pharmacies 8 placed suspicious orders? 9 A. That was done by counsel and the 10 experts who analyzed that data. 11 Q. So is the answer, no, you don't 12 know? 13 MS. KEARSE: Object to form. 14 A. I know that that's how this list 15 was created. How they did that, I do not know. 16 Q. If you would then go on to page 10 17 of the exhibit -- and we're still on 18 Exhibit 6 -- 19 A. Uh-huh. 20 Q. -- then there's a list here of 21 pharmacies that had the largest shipments of 22 opioids. 23 A. Uh-huh. 24 Q. Does the fact that a pharmacy had a 25 larger shipment of opioids than another</p>	<p style="text-align: right;">Page 125</p> <p>1 pounding. 2 MS. WINNER: Let's go off the 3 record. 4 THE VIDEOGRAPHER: Off the record 5 at 10:51. 6 (A recess was taken.) 7 THE VIDEOGRAPHER: On the record. 8 This is the beginning of Disk No. 2 of 9 deposition of Greta Johnson. The time is 10 11:09. 11 MS. KEARSE: I just want to, has 12 any- -- everyone on the phone made an 13 appearance? 14 MS. RAYFORD: I have not. This is 15 Latiera Rayford of Morgan Lewis on behalf of 16 the Teva Defendants. 17 MS. WINNER: Anyone else? 18 (No response.) 19 MS. WINNER: Okay. We'll go ahead, 20 then. 21 BY MS. WINNER: 22 Q. We were on Exhibit 6 and on page 23 10, the list of pharmacies that were identified 24 as having the largest shipments of opioids. 25 Do you see that?</p>

<p style="text-align: right;">Page 126</p> <p>1 A. I do.</p> <p>2 Q. And the question I was trying to</p> <p>3 ask you was whether you would agree that a</p> <p>4 pharmacy may have a large shipment of opioids</p> <p>5 simply because it has a lot of legitimate</p> <p>6 prescriptions to fill.</p> <p>7 A. Yes. I think these were identified</p> <p>8 because there was an increase in -- from, you</p> <p>9 know, one shipment to the next. So I -- I</p> <p>10 believe that some of the pharmacies were</p> <p>11 identified because of the increase.</p> <p>12 Q. Is that for the list on page 10 or</p> <p>13 the list on page 8?</p> <p>14 A. I want to make sure they're the</p> <p>15 same.</p> <p>16 Well, some -- it appears that some</p> <p>17 of them are the same. So these are identified</p> <p>18 as having just the largest overall set.</p> <p>19 Q. Yes.</p> <p>20 A. Okay. Okay.</p> <p>21 Q. So my question was, would you agree</p> <p>22 that a pharmacy may have a large shipment of</p> <p>23 opioids simply because it has a lot of</p> <p>24 legitimate prescriptions to fill?</p> <p>25 A. Yes.</p>	<p style="text-align: right;">Page 128</p> <p>1 Summit has investigated any of these pharmacies</p> <p>2 for wrongdoing?</p> <p>3 A. I don't know.</p> <p>4 MS. WINNER: I'd like to ask the</p> <p>5 reporter to mark as Exhibit 7 a document</p> <p>6 entitled "Summit County and City of Akron,</p> <p>7 Ohio, Plaintiff's First Amended Responses and</p> <p>8 Objections to Distributor Defendants' Third Set</p> <p>9 of Interrogatories."</p> <p>10 - - - -</p> <p>11 (Thereupon, Deposition Exhibit 7,</p> <p>12 Summit County and City of Akron,</p> <p>13 Ohio Plaintiff's First Amended</p> <p>14 Responses and Objections to</p> <p>15 Distributor Defendants' Third Set of</p> <p>16 Interrogatories, was marked for</p> <p>17 purposes of identification.)</p> <p>18 - - - -</p> <p>19 Q. Is this another one of the</p> <p>20 interrogatory documents that you reviewed in</p> <p>21 preparing for this deposition?</p> <p>22 A. Yes, or at least some form of this.</p> <p>23 Q. Okay. Well, why don't you turn to</p> <p>24 page 11.</p> <p>25 A. Okay. Okay.</p>
<p style="text-align: right;">Page 127</p> <p>1 Q. So the mere fact that -- that a</p> <p>2 shipment is large does not in and of itself</p> <p>3 indicate wrongdoing.</p> <p>4 A. No, but I think it does require</p> <p>5 that there is -- I don't want to say</p> <p>6 investigation, but there is sort of a look at</p> <p>7 why that size.</p> <p>8 Q. Do you know whether Summit has --</p> <p>9 has looked into the reasons why these are</p> <p>10 large?</p> <p>11 MS. KEARSE: Object to form.</p> <p>12 A. Whether -- you mean our counsel?</p> <p>13 Q. Whether Summit -- anyone from</p> <p>14 Summit has looked into the reasons why these</p> <p>15 particular pharmacies have had large shipments?</p> <p>16 A. I don't know that we had this data</p> <p>17 until fairly recently. This is, I believe,</p> <p>18 part of the ARCOS data.</p> <p>19 Q. My question was, do you know --</p> <p>20 A. Oh, okay. Sorry.</p> <p>21 Q. -- whether anyone from Summit has</p> <p>22 looked into the reasons why these particular</p> <p>23 pharmacies had large orders?</p> <p>24 A. I don't know.</p> <p>25 Q. Do you know whether anyone from</p>	<p style="text-align: right;">Page 129</p> <p>1 Q. And then, on about two-thirds of</p> <p>2 the way down the page, it says, "Subject to and</p> <p>3 waiving all objections, Plaintiff states that</p> <p>4 it believes on information and belief that the</p> <p>5 following individuals prescribed controlled</p> <p>6 substances that may be part of a suspicious</p> <p>7 order in its geographic area."</p> <p>8 Do you see that?</p> <p>9 A. I do.</p> <p>10 Q. And then there are five people who</p> <p>11 are identified below that, correct?</p> <p>12 A. I see that.</p> <p>13 Q. Do these names look familiar to</p> <p>14 you?</p> <p>15 A. Other than I -- I believe I've seen</p> <p>16 this document or a version of this document,</p> <p>17 no, I do not know these doctors.</p> <p>18 Q. Do you know why these doctors are</p> <p>19 believed to have prescribed controlled</p> <p>20 substances that may be part of a suspicious</p> <p>21 order?</p> <p>22 A. It's my understanding that based on</p> <p>23 the data we received from ARCOS that they were</p> <p>24 identified.</p> <p>25 Q. Oh, you believe these -- these</p>

<p style="text-align: right;">Page 130</p> <p>1 doctors were identified from ARCOS data?</p> <p>2 A. So my understanding is that these</p> <p>3 doctors are identified as potentially being</p> <p>4 part of a suspicious order in a geographical</p> <p>5 area, not necessarily that their prescribing</p> <p>6 was not appropriate, but that they wrote</p> <p>7 prescriptions that were part of a suspicious</p> <p>8 order in a geographical area.</p> <p>9 Q. And what's the basis for that?</p> <p>10 A. That's based on the ARCOS data, the</p> <p>11 expert analysis of it.</p> <p>12 But I know that -- I know that when</p> <p>13 we're talking about the prescriptions -- you</p> <p>14 know, our -- our contention is that it isn't</p> <p>15 just like any one prescription or any one</p> <p>16 doctor. It's -- it's in the aggregate. And</p> <p>17 when sort of forced or ordered to come up with</p> <p>18 certain prescriptions, our team looked at the</p> <p>19 three criterion of not a cancer patient, 120</p> <p>20 morphine-equivalent grams or -- "and," I should</p> <p>21 say -- not "or," "and" -- someone being</p> <p>22 prescribed who was identified as having drug</p> <p>23 dependency.</p> <p>24 So I -- I don't know if that's what</p> <p>25 you're asking, but that was the criterion</p>	<p style="text-align: right;">Page 132</p> <p>1 Q. Why were these five doctors</p> <p>2 identified in this discovery response? What</p> <p>3 is -- what are the criteria that were used to</p> <p>4 identify them?</p> <p>5 A. I don't know how to answer that</p> <p>6 question.</p> <p>7 Q. Okay. Do you know whether any of</p> <p>8 these doctors are believed to have done</p> <p>9 anything wrong?</p> <p>10 A. I don't know that that's the</p> <p>11 assertion. I know that they were identified as</p> <p>12 having written prescriptions that were</p> <p>13 contained in a part of a suspicious order.</p> <p>14 Q. How do you -- how do you determine</p> <p>15 whether prescriptions a particular doctor</p> <p>16 writes are part of a suspicious order?</p> <p>17 A. My understanding is in the way</p> <p>18 that -- I don't know if it was the special</p> <p>19 magistrate or the judge -- sort of the</p> <p>20 flowchart he did, when a suspicious order comes</p> <p>21 in, my understanding is that it's all of those</p> <p>22 prescriptions that were written that were</p> <p>23 filled by that particular order. So I --</p> <p>24 Q. Well, but an order goes -- a</p> <p>25 suspicious order -- a suspicious order is an</p>
<p style="text-align: right;">Page 131</p> <p>1 for --</p> <p>2 Q. Well, we're going to be coming --</p> <p>3 we'll be coming back to -- to those questions</p> <p>4 later.</p> <p>5 A. Okay.</p> <p>6 Q. That's a separate set of -- of</p> <p>7 discovery requests.</p> <p>8 A. Okay.</p> <p>9 Q. My question is, how did these --</p> <p>10 these -- you come up with these specific five</p> <p>11 doctors?</p> <p>12 A. I --</p> <p>13 Q. Are they the ones who wrote the</p> <p>14 prescriptions that you responded to in the</p> <p>15 other discovery requests?</p> <p>16 A. I don't -- I don't know the answer</p> <p>17 to that. I'm afraid that I'm -- I'm probably</p> <p>18 trying to answer a question I don't understand.</p> <p>19 So I --</p> <p>20 Q. Okay.</p> <p>21 A. -- I'll -- I'll ask you --</p> <p>22 Q. Well, let me --</p> <p>23 A. -- to start over.</p> <p>24 Q. -- let me try the question again.</p> <p>25 A. Sure.</p>	<p style="text-align: right;">Page 133</p> <p>1 order placed by a pharmacy, correct?</p> <p>2 A. That's -- that's my understanding,</p> <p>3 yes.</p> <p>4 Q. Okay. And the ARCOS data has</p> <p>5 information on pharmacy orders. It doesn't</p> <p>6 have information about prescriptions or doctors</p> <p>7 who write prescriptions, correct?</p> <p>8 MS. FLOWERS: Objection. Lack of</p> <p>9 foundation.</p> <p>10 Q. Or does it?</p> <p>11 A. Could you say that again, please?</p> <p>12 Q. Does the ARCOS data include</p> <p>13 information about prescriptions, individual</p> <p>14 prescriptions?</p> <p>15 A. I believe that what we did was used</p> <p>16 a -- a different -- I don't know what to call</p> <p>17 it -- data warehouse to get some of that</p> <p>18 information.</p> <p>19 Q. So how do you know -- how do you</p> <p>20 know whether Dr. Mark Davis wrote a</p> <p>21 prescription that was part of a suspicious</p> <p>22 order?</p> <p>23 A. It's my understanding the</p> <p>24 information that's been gathered by the</p> <p>25 attorneys identifies that.</p>

Page 134

1 Q. So this is something the attorneys
2 came up with?

3 A. Well, I don't think that they
4 created it out of thin air. I -- I -- my
5 understanding is that the ARCOS data is one
6 piece of it, and that the second piece is --
7 gosh, what's the name of it -- Rawlings is a
8 data mine of sorts.

9 Q. Uh-huh.

10 A. That's what I've come to -- to
11 know, that we contracted with to get the
12 information about, sort of, start to finish
13 where the pills came from.

14 Q. So do you know where the pills that
15 Dr. Mark Davis came from prescribed?

16 When Dr. Mark Davis prescribed
17 pills, somebody had to go to a pharmacy and
18 fill that prescription, right?

19 A. Yes.

20 Q. Or maybe they maybe went to 20 or
21 30 or 80 different pharmacies to fill those
22 prescriptions, correct?

23 A. Sure.

24 Q. How do we know -- how do we find
25 which suspicious order he's being tied to here?

Page 135

1 A. Again, it's my understanding that
2 the ARCOS data, coupled with the data that we
3 contracted with to get from Rawlings, put this
4 piece together.

5 Q. And that's all you know about it?

6 A. That is, yes.

7 Q. Do you know whether any of the
8 prescriptions written by Dr. Mark Davis were
9 improper?

10 A. Improper in what way?

11 Q. They weren't meant for medically
12 necessary purposes.

13 A. I -- I don't want to put my place
14 in -- I don't want to put myself in the place
15 of a medical doctor. I don't -- I don't know.

16 Q. Do you know whether any of the
17 prescriptions written by the other doctors
18 listed here were improper in the sense of not
19 being medically necessary?

20 A. I -- same answer. I don't
21 recognize these names. However, I know we did
22 prosecute more doctors than the ones I named
23 originally. I -- I don't have all of their
24 names committed to memory. So if they were
25 someone that was prosecuted, certainly. But

Page 136

1 beyond that, I don't know.

2 MS. WINNER: Okay. I'd like to
3 mark as Exhibit 8 a document entitled "Summit
4 County and City of Akron, Ohio, Plaintiff's
5 First Amended Responses and Objections to
6 Distributor Defendants' First Set of
7 Interrogatories."
8 - - - - -
9 (Thereupon, Deposition Exhibit 8,
10 Summit County and City of Akron,
11 Ohio Plaintiff First Amended
12 Responses and Objections to
13 Distributor Defendants' First Set of
14 Interrogatories, was marked for
15 purposes of identification.)
16 - - - - -
17 Q. My question on this one relate to
18 page 36.

19 A. Have I seen this one?

20 Q. You were just asking yourself under
21 your breath whether you've seen this one.

22 A. Yes.

23 Q. What's the answer to that question?

24 A. I -- I think I -- I try and look at
25 the dates because you all amend the responses.

Page 137

1 I believe I have seen this, and I --

2 Q. Okay.

3 A. Yeah, I recognize this paragraph.

4 Q. Okay.

5 A. Yes.

6 Q. Good. Well that's the paragraph I
7 wanted to ask you about.

8 A. Sure.

9 Q. It refers to four prescribers in
10 Summit County who were convicted of crimes
11 involving drug diversion?

12 A. Yes.

13 Q. And it says "since 2014." Were
14 there any prescribers convicted of crimes
15 involving drug diversion before 2014?

16 A. I don't know the answer to that.
17 I -- I would have -- if you would have asked me
18 when it started, I would have said early teens,
19 but I don't know the exact -- the exact years.

20 Q. Well, what did Dr. Harper and his
21 employees do?

22 A. They were sort of one of the most
23 prominently known offices for folks who were
24 seeking prescriptions. The investigation into
25 Dr. Harper was lengthy, as I recall. And they

<p style="text-align: right;">Page 138</p> <p>1 were prescribing just incredibly large numbers 2 of opioids at the time. 3 Q. Now, he prescribed -- some of the 4 people he prescribed to, I assume, were 5 probably addicts; is that correct? 6 MS. KEARSE: Object to form. 7 A. I mean, I think that a lot of 8 people who went into Dr. Harper's office were 9 definitely suffering from addiction, yes. 10 Q. And some of his patients were not 11 addicts when they went in, but may have been 12 addicts after they were his patients? 13 A. They became addicts after -- after 14 taking opioids, yes, certainly. 15 Q. And those were opioids that he 16 prescribed? 17 A. Yes. 18 Q. Do you know how many patients were 19 in that category? 20 A. In the category of? 21 Q. The people who went -- who weren't 22 addicts when they went -- 23 A. Oh. 24 Q. -- to him but became addicts after 25 having seen him and gotten prescriptions from</p>	<p style="text-align: right;">Page 140</p> <p>1 prosecuted for filling his prescriptions? 2 A. Prosecuted? Like criminally 3 prosecuted? 4 Q. Well, let's start with just 5 invest- -- criminally investigated. 6 A. Well, I'm certain that, you know, 7 you'll -- you'll be able to talk to Detective 8 Leonard about that more specifically, but I 9 know that Detective Leonard visited pharmacies 10 and inquired of and, you know, asked multiple 11 questions. And at that point when it began the 12 investigation, as I stated before, OARRS was 13 not what it is today. It was much more 14 difficult to put these types of cases together 15 because it relied heavily on patients 16 responding to law enforcement, and that was a 17 really difficult thing to get people to do. 18 Q. When did OARRS become what it is 19 today? 20 A. Well, it continues to evolve. I 21 mean, 2013 and 2014 there really became an 22 enhanced promotion to use it. There was 23 legislation, I think it was in '13 and maybe 24 went into effect in '14, right around that 25 time, giving access for different uses of law</p>
<p style="text-align: right;">Page 139</p> <p>1 him. 2 MS. KEARSE: Object to form. 3 A. I -- I don't know the numbers. 4 Q. Do you know how -- what the numbers 5 were overall of how many patients he prescribed 6 to? 7 A. No, but I know that it was 8 hundreds. I mean, I -- I can remember reading 9 that in the paper. It was hundreds of people, 10 yes. 11 Q. And what -- what was the 12 involvement of his three employees? 13 A. I recall that they were taking cash 14 for, you know, filling, essentially, some 15 prescriptions, or tak- -- or not -- they were 16 taking cash for the doctor visits and there was 17 a lack of recording and reporting of the 18 dollars coming through the doors. Beyond that, 19 I can't recall what the employees' involvement 20 was. 21 Q. Where were -- where were his 22 prescriptions filled? 23 A. I'm sure that they were filled all 24 over Summit County. 25 Q. Were any pharmacies investigated or</p>	<p style="text-align: right;">Page 141</p> <p>1 enforcement, pharmacists and doctors, and 2 that's really, again, when this public 3 awareness campaign began about making sure 4 people understood the risks and the addictive 5 nature. 6 Q. Well, but I'm -- again, I'm 7 focusing on when did things change with OARRS? 8 A. So it's changed multiple times. 9 Q. Well, when did OARRS -- let me ask 10 you another question. When did OARRS start -- 11 when -- when did OARRS first have a significant 12 impact on diversion? 13 MS. KEARSE: Object to form. 14 A. From the County's perspective, 15 OARRS had a significant impact on diversion 16 around '13 and '14, and -- and I would say that 17 because of the grand scale at that time. 18 It certainly had an impact, and 19 significant impact, when our law enforcement 20 officers were using it in the late 2000s and -- 21 and early teens as well. It was a new tool. 22 But certainly, you know, it wasn't admissible 23 in court. It was -- I called it, like, it was 24 sort of like a dull butter knife. It -- it 25 helped, but it -- it wasn't very precise and --</p>

<p style="text-align: right;">Page 142</p> <p>1 and could not be used for the ultimate question 2 that would be called into court in a criminal 3 case. 4 Q. And that was because it wasn't 5 admissible? 6 A. Correct. 7 Q. And when did that change? 8 A. I don't know that it has. I -- I 9 don't know that -- 10 Q. Okay. 11 A. -- it's admissible even today. 12 Q. Well, when -- when -- what changed 13 that made it have an impact that it hadn't had 14 before? 15 A. Legislatively there were more folks 16 who were able -- 17 Before, you -- I recall prosecutors 18 weren't able to access it. I don't believe 19 when I started as a prosecutor any of us had 20 access to it. 21 It just became a tool -- I think 22 there was some changes in 2009, and then in '13 23 and '14 there was some pressure, publicly, from 24 law enforcement and public health and ADM, not 25 just in Summit County, but across the state,</p>	<p style="text-align: right;">Page 144</p> <p>1 changed Dr. Harper's. 2 Q. All right. Let me ask you, then, 3 about the other doctor who's identified in this 4 response. Brian Heim? 5 A. Yes. 6 Q. Am I pronouncing that right? 7 A. That's the way I say it, yes. 8 Q. What did he do? 9 A. The same. He was writing 10 prescriptions that wouldn't comport with the -- 11 with his oath; that I -- I believe he was 12 another one who was known in the community as 13 someone you could get an opioid prescription 14 from. 15 Q. Well, it's not a crime to not 16 comply with your doctor's oath, is it? 17 A. I suppose it depends on how far you 18 stray, but no, not in and of itself. 19 Q. What he was convicted of was 20 something different, correct? 21 A. Correct. 22 Q. How many patients did -- did he 23 have; do you know? 24 A. I don't know the answer to that. 25 Q. Were there any other doctors</p>
<p style="text-align: right;">Page 143</p> <p>1 that this was a tool that more people needed to 2 be using; that doctors needed to use it, the 3 pharmacists needed to use it, and it needed to 4 be more widely known to be used in 5 investigatory purposes. 6 Q. When were doctors first required to 7 use it? 8 A. First required? I don't think they 9 were required until that '13-'14 time. I -- 10 I -- 11 Q. Are you sure about that? 12 A. I don't know for sure, though. 13 That's when it stands out to me as being very 14 prominently discussed. 15 Q. Have doctors ever been disciplined 16 for not using it? 17 A. I don't know the answer to that. 18 Q. Have they ever been prosecuted for 19 not using it? 20 A. I don't know if that's a part of 21 the prosecutions that -- that happened. 22 Q. I take it having access to OARRS 23 would not have changed Dr. Harper's behavior? 24 MS. KEARSE: Object to form. 25 A. I can't speak to what would have</p>	<p style="text-align: right;">Page 145</p> <p>1 that -- who are not listed in this response 2 that you're aware of? 3 A. Dr. Bressi. There are a number of 4 doctors. I can't -- I -- I can't come up with 5 the names, but there are at least a handful I'm 6 sure that I've read about and have seen and am 7 aware of. 8 Q. How do you spell Bressi? 9 A. B-r-e-s-s-i, I believe. 10 Q. What did Dr. Bressi do? 11 A. He was -- a lot of the same thing. 12 But I believe he was the one who switched from 13 being a gynecologist to being a pain management 14 specialist. 15 Q. More lucrative. 16 MS. KEARSE: Object to form. 17 MS. WINNER: I withdraw it. 18 Was Dr. Bressi convicted? 19 A. Yes. 20 Q. When? 21 A. I don't know the answer to that. 22 Within the last five years. 23 Q. Where was he operating? 24 A. In Summit County. I don't recall 25 where he was.</p>

<p style="text-align: right;">Page 146</p> <p>1 Q. Was Dr. Harper's operation what you 2 would consider to be a pill mill? 3 A. Yes. 4 Q. How about Dr. Heim? 5 A. Yes. 6 Q. How about Dr. Bressi? 7 A. Yes. 8 Q. Are there any statistics on how 9 much diversion has occurred in Summit County 10 each year? 11 A. I mean, we know how many pills were 12 prescribed. But I -- again, with diversion 13 being -- taking so many forms, I -- I don't 14 know that we have the -- the percentages. 15 Q. How do you know how many pills were 16 prescribed? 17 A. We have that data from OARRS. And 18 I've seen it through the public health 19 department as well as the ADM Board. 20 Q. Where did they get it? 21 A. From -- from the OARRS data. 22 Q. So the ultimate -- the ultimate 23 source is the OARRS data? 24 A. Correct. 25 Q. Are you aware of any diversion</p>	<p style="text-align: right;">Page 148</p> <p>1 conducted last year? 2 A. I -- I don't know the exact number. 3 Like the Summit County Drug Unit or all across 4 Summit County? 5 Q. Either one. 6 A. No, but the -- yeah. No, I don't. 7 Q. Okay. 8 A. No to both. 9 Q. Do you know the answer to that 10 question for any year? 11 A. I believe I read something that you 12 just put in front of me from 2016 for the 13 Summit County Drug Unit. There -- there was a 14 number in there. 15 Q. It was a very small number of 16 indictments? 17 A. Yeah. But I -- that was like a 18 six -- it was a six-month period, so if you can 19 assume that it doubles, sure. 20 Q. Do you know of any other source of 21 statistics on that subject? 22 A. The sheriff's annual report, I 23 reviewed those, and I know that in those there 24 was graphs -- or charts, really, that talk 25 about the different drugs and -- and what's</p>
<p style="text-align: right;">Page 147</p> <p>1 occurring outside Summit County that has had an 2 impact within Summit County? 3 A. I -- certainly there were instances 4 where folks who could not -- who went across 5 state lines or county lines to obtain different 6 prescriptions, yes, certainly that happened. 7 Q. How often? 8 A. I don't know. 9 Q. Do you know what percentage of the 10 diversion that's affected Summit County comes 11 from outside Summit County? 12 A. I don't. 13 Q. Has any of that diversion from 14 outside Summit County involved, you know, drug 15 trafficking organizations as opposed to just 16 individuals? Do you know? 17 A. I suspect it could. Certainly 18 there are cases where cocaine, heroin, things 19 like that are trafficked in, in addition to 300 20 pills or something like that. Certainly 21 that -- those instances have happened. 22 Q. Do you know how often? 23 A. I don't know how often. 24 Q. Do you know how many prescription 25 drug diversion investigations Summit County</p>	<p style="text-align: right;">Page 149</p> <p>1 been investigated. 2 Q. Any other sources of information 3 for that? 4 A. Just my discussions with the 5 detectives. You know, Detective Leonard and 6 Detective Baker-Stella. Just those 7 conversations. 8 Q. Who does Detective Baker-Stella 9 work for? 10 A. She works for the Summit County 11 Sheriff's Office, but she is assigned as the 12 task force officer for the DEA for the 13 department. 14 Q. And what did you discuss with her? 15 A. I talked to her a little bit about 16 just finding out when she made the transition 17 to being the task force officer and what her 18 duties are now and some of the work that she's 19 done in Summit County. 20 I asked her specifically about 21 ARCOS, because it was completely unfamiliar to 22 me until this lawsuit, and if she had had any 23 interaction with it. 24 And we talked about how while she's 25 designated to be the task force officer in</p>

<p style="text-align: right;">Page 150</p> <p>1 tactical diver- -- or no. There's two 2 different diversions. One is tactical, and one 3 is not. I don't remember which. But in 4 diversion, that -- all of the sworn officers 5 for the sheriff's department and all the police 6 departments have the arresting authority and 7 have some training on identifying and 8 investigating these cases. 9 Q. What did she tell you about the 10 work she's done? 11 A. She indicated that she works not 12 just in Summit County, but she works all, sort 13 of, over Northeast Ohio now, and that she has 14 gone undercover into some doctors' offices, and 15 has, you know, participated in the 16 investigation of both prescribers and -- and 17 users. 18 Q. Is there anything else she's 19 told -- she told you about the work she's done? 20 A. She talked about how she uses OARRS 21 a lot, that that is a primary tool for her. 22 And that she assists other officers who are not 23 as familiar, who do not have access to it, if 24 they have an investigation or suspect, you 25 know, criminal activity.</p>	<p style="text-align: right;">Page 152</p> <p>1 in -- in either Akron or Summit County has 2 asked for access to ARCOS? 3 A. It's my understanding that it -- 4 this was not something where access was 5 granted, that -- that there was no local access 6 available. In fact, it's my understanding that 7 none of these numbers or none of these sort of 8 statistics became available until the Judge in 9 this case ordered them released. 10 Q. But do you know whether they asked? 11 A. I don't know. I don't know that 12 they knew they existed. 13 Q. Well, okay. Let me just ask you 14 that straight out. Do you know whether anybody 15 other than Detective Baker-Stella knew about 16 ARCOS? 17 A. I don't. 18 Q. What did Detective Leonard -- is it 19 Detective Leonard? 20 A. It is. 21 Q. What did Detective Leonard tell you 22 about his work? 23 A. Well, I've known Detective Leonard 24 since my first days as a prosecutor, so we've 25 worked together multiple occasions. So I knew</p>
<p style="text-align: right;">Page 151</p> <p>1 I think -- I think that's about it. 2 Q. Anything else she told you about 3 the work she does? 4 A. I think that's it. Yeah. 5 Q. What did she tell you about ARCOS? 6 A. That she'd been trained briefly on 7 it when she went to Quantico, but that she did 8 not regularly use that. That there were 9 analysts who work with the DEA who have -- 10 probably my words, not hers -- more in-depth 11 understanding or training on -- on that 12 particular database. 13 Q. Does anybody in Summit County use 14 ARCOS for anything, apart from your lawyers in 15 this litigation? 16 A. No. And I've asked. You know, 17 Detective Leonard did not have access to it. 18 And while, again, all of our officers can 19 arrest for these offenses, those were the 20 places I'd start. They tend to be the go-to 21 folks when you have questions about these types 22 of cases. So, no, no one had had that access. 23 Q. Has he asked for access? 24 A. I don't know the answer to that. 25 Q. Do you know whether anybody else</p>	<p style="text-align: right;">Page 153</p> <p>1 him from having cases with him. 2 And then when we met to discuss in 3 preparation for this deposition, he indicated 4 that he had not had access to ARCOS. And I 5 can't recall if he knew that it existed. I 6 don't know the answer to that. 7 But we talked about some of the 8 investigations into the doctors, and he 9 reminded me of how incredibly difficult those 10 cases were early on without OARRS access and 11 without mandatory reporting to OARRS and -- 12 and -- yeah. I -- we just talked about sort of 13 the way we went through some cases. 14 Q. Were there any investigations you 15 talked about other than investigations into 16 doctors? 17 A. Not specifically. We talked more 18 generally about how this seemed to create a new 19 population of people suffering from addiction 20 and a new class of felons. Again, a lot of the 21 folks we were seeing didn't have a prior 22 criminal record. 23 And we talked about how it really 24 changed our perception on treatment and how, 25 for better or for worse -- really, for worse --</p>

Page 154

1 we had spent a couple of decades trying to
 2 arrest our way out of addiction.
 3 And that hopefully this epidemic,
 4 if there is any silver lining, that it will
 5 serve to be really the -- the spotlight will be
 6 shown that -- that addiction is an illness, and
 7 we have been criminalizing illness for a long
 8 time. Because he -- you know, Detective
 9 Leonard talks about soccer moms and the nurses
 10 and having levels of empathy for them.
 11 And again, we didn't do a good job,
 12 probably, in the '80s and '90s when we were
 13 trying to have this war on drugs because we
 14 were just -- thought we could arrest and
 15 incarcerate our -- our way out of it.
 16 So our shifts -- and I'm off the
 17 question, but our shift really -- when
 18 Detective Leonard and I were talking, we talked
 19 about how important drug courts became. We
 20 talked about how there was this new influx.
 21 And we've seen in Summit County
 22 opioid addiction has flooded our communities in
 23 such a way that we've had to increase our
 24 capacity in drug courts, and we had a pretty
 25 robust drug court to begin with.

Page 155

1 And really intentional about
 2 messaging on this. That while they may be in
 3 the criminal justice system, criminal justice
 4 system recognizes that addiction is an illness
 5 and how do we rehabilitate that better than
 6 just incarcerating?
 7 Q. I was asking you about what he told
 8 you about his investigations.
 9 A. Yeah.
 10 MS. KEARSE: I'm going to object.
 11 Counsel, you asked her what did you talk about.
 12 You left it more open.
 13 Q. Well -- well, whatever.
 14 What else did he tell you about his
 15 investigations, if anything?
 16 A. He talked to me about driving from
 17 place to place in trying to get the cooperation
 18 of the patients. And he talked about -- I
 19 can't recall anything else about the
 20 investigations.
 21 Q. Well, let me ask you this. Did he
 22 identify anybody other than doctors that he was
 23 investigating?
 24 A. Oh, he certainly investigated
 25 individuals who were forging drug documents and

Page 156

1 who were engaged in deceptions to obtain
 2 dangerous drugs, yes.
 3 Q. So -- so he was also investigating,
 4 we'll call them, patients or users, however you
 5 want to refer to them.
 6 Was there anybody else who -- any
 7 other category he was investigating?
 8 A. I don't believe so.
 9 Q. Now, OARRS made a significant
 10 difference in the ability to investigate
 11 diversion; is that correct?
 12 A. Yes.
 13 Q. And you said there were changes in
 14 around 2013, 2014?
 15 A. Yes.
 16 Q. Why -- why weren't those changes
 17 instituted earlier?
 18 A. Well, it was a legislative change
 19 allowing more access, I guess is the best way
 20 to put it.
 21 And, you know, at that time, and
 22 still currently, it -- it's not uncommon to
 23 find legislators who believe that addiction is
 24 a moral issue rather than a medical, and so
 25 it's -- that's a big boulder to push up the

Page 157

1 hill.
 2 And the administration tended to
 3 be, for a time period, more concerned about the
 4 criminal penalties: making sure that we were
 5 prosecuting doctors; and making sure that we
 6 were looking at folks who were using and who
 7 were addicted; looking at changing the bulk
 8 amounts, and things like that. Looking,
 9 really, at the criminal side of things and --
 10 and how to use those penalties, I guess, in a
 11 way, rather than looking at ways to combat it,
 12 prevent it, stop it before it starts. Things
 13 like that.
 14 Q. So you think it was a mistake for
 15 broader access to OARRS not being made
 16 available earlier?
 17 MS. KEARSE: Object to form.
 18 A. I think when you know better, you
 19 do better. So, I -- you know. I don't ever
 20 like to assume nefarious intent. I certainly
 21 don't think legislators wanted people to get
 22 hooked on opioids and end up shooting heroin in
 23 a gas station bathroom, no.
 24 So I think also that change came
 25 about when there was a real sort of -- the

<p style="text-align: right;">Page 158</p> <p>1 awakening was beginning that these pills that 2 were once promoted as being non-addictive were 3 certainly the very opposite of that. 4 Q. Now, OAR- -- access to OARRS is 5 still limited, correct? Not every person can 6 get access? 7 A. Correct. And even those who have 8 access, you can't just jump on and noodle 9 around. It's got to be for a specific patient 10 or a specific purpose. 11 Q. And none of the Defendants have 12 access to OARRS, do they? 13 MS. KEARSE: Object to form. 14 A. I don't know the answer to that. 15 Q. When Summit County comes across a 16 situation involving diverted opioid -- 17 prescription opioids, what effort is made to 18 trace the source and origin of those opioids? 19 A. I suppose it depends on how they 20 come into contact with those diverted opioids. 21 If it's a law enforcement contact, certainly 22 many of the officers and detectives will simply 23 ask, "Where did you get it?" And by and large, 24 there are two different answers. It's, "I 25 don't know. Not mine. Not my purse. Not my</p>	<p style="text-align: right;">Page 160</p> <p>1 you're not able to find out where they came 2 from? 3 MS. KEARSE: Object to form. 4 A. I would -- I -- I don't know that I 5 can answer that. I -- I don't know that I'm 6 comfortable answering that one. 7 I would say that -- that primarily 8 when they come into contact with law 9 enforcement, if they're -- if they're a 10 first-time offender, meaning it's their first 11 interaction with law enforcement, they 12 typically are willing to talk, because our law 13 enforcement community has been trained to get 14 folks to talk to them and let them know that, 15 you know, now in Summit County with these 16 felony 5s, you're not going to jail tonight. 17 You're going to get a summons. We're going to 18 ask you to come in on a certain day, and what 19 can we do to try and get you some help to get 20 that started. 21 Q. Well, but more generally, not just 22 focusing just on the first-time offenders -- 23 A. Uh-huh. 24 Q. -- more generally, can you estimate 25 what percentage of the time you're able to find</p>
<p style="text-align: right;">Page 159</p> <p>1 pants. Not my car." Or, you know, there's no 2 response. They don't want to talk about it. 3 Occasionally folks are willing to 4 share their story, and typically it's 5 first-time arrestees, unsophisticated in the 6 ways of law enforcement. But then that process 7 typically goes into one of our drug courts or 8 are treatment in lieu of conviction now, so 9 they have contact with a caseworker and a 10 probation officer. 11 If we come into contact with those 12 diverted pills now, occasionally it's through 13 some of our programming. We've got an 14 emergency room program where folks can walk in, 15 and it is treated as a medical emergency if 16 they've -- and if they have drugs on them, on 17 their person, there's typically some leniency 18 from law enforcement that if they're seeking 19 help that -- that they're not going to be 20 arrested for being in possession. 21 But there's always an effort made 22 to try and find out, but it -- it's -- folks 23 are pretty reluctant to talk about where they 24 got them. 25 Q. So would you say most of the time</p>	<p style="text-align: right;">Page 161</p> <p>1 out -- 2 A. I couldn't -- 3 Q. -- where the pills came from? 4 A. I couldn't estimate that. 5 Q. When Summit County responds to an 6 overdose incident that involves heroin or 7 fentanyl, do you try to find out if that person 8 has been prescribed opioids previously? 9 A. Yes. Our -- our detectives who 10 investigate those, I believe, have OARRS 11 access. And certainly if it's, unfortunately, 12 a -- a death -- an overdose death, our medical 13 examiner has that access as well. 14 Q. Do you know what percentage of the 15 time the person has previously had an opioid 16 prescription? 17 A. I don't know that percentage. 18 Q. Does Summit County know how many 19 prescription opioids were consumed in Summit 20 County in any given year? 21 A. Consumed? 22 Q. Consumed. 23 A. No. Prescribed? Yes. 24 Q. And prescribed, that's from OARRS? 25 A. Yes.</p>

<p style="text-align: right;">Page 162</p> <p>1 Q. And who puts the information into 2 OARRS that -- from which that statistic is 3 derived? 4 A. I believe there's a requirement 5 that doctors use it, as well as pharmacists. 6 Q. How long has that been in place? 7 A. Again, I feel like that big change 8 came in -- in '13-'14. 9 Q. Okay. So do you -- would you know 10 how many prescriptions -- or would you have the 11 ability to find out how many prescriptions were 12 pres- -- how many opioids were prescribed in 13 Summit County in, say, 2011? 14 A. Well, I think it's a best guess, 15 because I don't think it was mandatory 16 reporting. I think a lot -- a lot was being 17 reported, but I don't believe it was mandatory 18 at that time. So it would -- I guess for lack 19 of a better term, it would be underreported, 20 the numbers that we have. 21 Q. Has Summit County ever sought the 22 assistance of the board of pharmacy in using 23 data that the board has from OARRS or otherwise 24 to help combat diversion? 25 A. I know that our public health</p>	<p style="text-align: right;">Page 164</p> <p>1 OARRS, and I think you said that Dr. Smith -- 2 A. Yes. 3 Q. -- uses OARRS. 4 Does anybody else in the County use 5 OARRS for anything? 6 A. Probation officers have access to 7 OARRS. And it's my understanding, you know, 8 if -- as part of your probation, you are 9 required to give urine screens. You know, if 10 you come up positive for an opioid, certainly 11 they would be looking to see if, in fact, you 12 had a valid prescription. 13 And I believe the drug court 14 judges, through the probation officers, use 15 some OARRS data. 16 The medical examiner, in very 17 limited situations. 18 And, obviously, we don't employ 19 physicians outside of our medical examiner's 20 office, but physicians in Summit County and 21 pharmacists in Summit County have access. 22 Q. But they have access -- okay. 23 Strike that. 24 Does Summit County have any 25 policies that require anyone to -- employed by</p>
<p style="text-align: right;">Page 163</p> <p>1 department and our ADM Board interface with the 2 pharmacy board in an effort to make sure that 3 we have good data. 4 I don't know the specifics of it 5 other than I know that, you know, Dr. Smith 6 from ADM has OARRS data access. And obviously 7 there's a public dashboard for OARRS that I 8 know gets used. I would -- I'm sure it's daily 9 with some -- some of the public health staff. 10 Q. Anybody else -- any- -- anything 11 else that's done to interface with the board of 12 pharmacy? 13 A. I -- I mean, in the prosecutor's 14 office, I don't recall a pharmacist being 15 prosecuted. I don't recall that ever 16 happening. So I -- I don't think so. I don't 17 recall the County touching the board of 18 pharmacy in any other fashion. 19 Q. Does anyone other than -- okay. 20 Just to make sure I've -- I've -- we've touched 21 on OARRS before, I don't want to repeat what 22 we've already covered, but you talked about how 23 Detective Baker-Stella uses OARRS -- 24 A. Uh-huh. 25 Q. -- and Detective Leonard uses</p>	<p style="text-align: right;">Page 165</p> <p>1 the County to use OARRS for anything? 2 A. I don't know that it's a written 3 policy with the sheriff's department that 4 requires them to use OARRS. But certainly it 5 would be one of the best investigata- -- 6 investi- -- 7 Q. Investigative. 8 A. -- thank you -- tools; that there 9 would be an expectation that it would be used 10 in these. I -- I don't know if it's a -- if 11 it's a written policy from the Sheriff. 12 Q. And that would be Detective 13 Leonard? 14 A. It would be any of them. Detective 15 Leonard's employed by the Akron Police 16 Department -- 17 Q. I'm sorry. 18 A. -- but -- but he really -- his 19 reputation is the guy who knows this stuff. 20 And while everyone who works for the Akron 21 Police Department in a uniformed capacity in -- 22 in the detective bureau -- 23 Q. Uh-huh. 24 A. -- they make those arrests and they 25 do those investigations as well, but certainly</p>

Page 166

1 he's somebody they could call. And Detective
 2 Baker-Stella for the sheriff's office, the
 3 same.
 4 I think the investigations occur,
 5 you know, on the street level, but if there's
 6 questions or, you know, a deeper dive needs to
 7 occur, I think those are the two folks who
 8 typically get contacted with questions.
 9 Q. Does anybody other than those two
 10 have direct access to OARRS within law
 11 enforcement?
 12 A. I know in Summit County, Carmen
 13 Ingram, who works for the Summit County
 14 sheriff's office, and she works with the drug
 15 task force -- or the Summit County Drug Unit,
 16 she has access, and then Captain Paolino also
 17 has access.
 18 Q. Anyone else?
 19 A. I don't think so.
 20 Q. Does anyone have access in any of
 21 the other, you know, townships throughout
 22 Summit County?
 23 A. I -- yes, I'm sure that there are
 24 officers. I've personally worked with officers
 25 who have used OARRS data or OARRS reports.

Page 167

1 Q. Going back to back when you were a
 2 prosecutor?
 3 A. Yes.
 4 Q. So law enforcement did have --
 5 A. Some access.
 6 Q. -- some access?
 7 A. Some access.
 8 Q. What's the difference between the
 9 access they had before and what they have now?
 10 A. I feel like there's more
 11 information. I haven't seen an OARRS report
 12 post-'14 because I was no longer a prosecutor.
 13 But I -- as -- in my discussions
 14 with Detective Leonard and -- and the things
 15 that I've read about the sort of evolution of
 16 OARRS, I believe there's more information. And
 17 with the mandatory reporting part of it, I
 18 think is really what changed things.
 19 Q. So there's more information because
 20 more is going in?
 21 A. I think so. I think so. And I --
 22 I think there's a better understanding of how
 23 to use it now.
 24 I think when it was first
 25 available, it was kind of like, "Hmm, good

Page 168

1 luck." There wasn't a lot of intensive
 2 training for law enforcement, and I think our
 3 officers now have more specific training.
 4 Q. Does Summit County receive any
 5 access to any suspicious order reports about
 6 pharmaceutical orders placed by pharmacies?
 7 A. I -- you mean like this -- do our
 8 detectives receive that information? I
 9 don't --
 10 Q. Anybody in the County, apart from
 11 the lawyers representing you in this
 12 litigation.
 13 A. Yeah. I don't --
 14 Q. We're always excluding them.
 15 A. Sure.
 16 MS. KEARSE: Gee, thanks. You want
 17 us to leave?
 18 MS. WINNER: Sure. Go ahead.
 19 A. I don't -- I don't know. I don't
 20 know if they receive that information.
 21 Q. All right. Well, we talked
 22 about -- we've talked about OARRS. We've
 23 talked a little bit about ARCOS.
 24 Are there any other database
 25 resources that Summit County has access to

Page 169

1 detect or combat diversion?
 2 A. I -- I don't think there are any,
 3 like, government-function databases. As I
 4 stated, there's a data dashboard that the
 5 public health department and ADM work hand in
 6 glove on making sure those are accurate numbers
 7 that the public can access and can be used by
 8 law enforcement if -- if that's what they're
 9 looking for.
 10 Q. Are there any other database
 11 resources that the County has to detect or
 12 combat diversion?
 13 A. I don't believe so. None that -- I
 14 should say none that I'm aware of.
 15 Q. Are there any other government
 16 agencies that the County reaches out to for
 17 assistance in detecting or combatting
 18 diversion?
 19 A. Certainly the DEA, with Detective
 20 Baker-Stella being a task force member.
 21 Detective Leonard is also a task force
 22 member -- task force officer with the DEA.
 23 And there are FBI task force
 24 officers who work in the same proximity as our
 25 Summit County Drug Unit, the Akron narcotics

Page 170

1 division, so I know that the FBI is also called
 2 upon to assist in investigations. Whether
 3 they're specifically targeted at diversion, I
 4 couldn't say, but they all work in the same
 5 building together on many cases.
 6 Q. Well, there is a -- a HIDTA task
 7 force that Summit County participates in,
 8 correct?
 9 A. Correct.
 10 Q. And HIDTA is H-I-D-T-A, High
 11 Intensity Drug Trafficking --
 12 A. Area.
 13 Q. -- Area?
 14 A. Correct.
 15 Q. Does that task force get involved
 16 in -- in investigating diversion?
 17 A. I think as -- as necessary, yes.
 18 Q. What percentage of its efforts
 19 relate to diversion?
 20 A. I don't know.
 21 Q. Has Summit County ever reached out
 22 to any of the Defendants for assistance in
 23 combatting diversion?
 24 A. I know that we have sought and been
 25 granted a grant from Cardinal with sort of the

Page 171

1 long-term goal being less opioids in Summit
 2 County, yes.
 3 Q. Anything else?
 4 A. Not that I'm aware of.
 5 Q. Has Summit County reached out to
 6 any of the manufacturing -- Manufacturer
 7 Defendants for assistance in connection with
 8 the opioid problem?
 9 MS. KEARSE: Object to form.
 10 A. I -- I mean, reached out.
 11 Formally?
 12 Q. In any way. And I don't -- other
 13 than filing this lawsuit. We'll not count
 14 that.
 15 A. I've forgotten about them already.
 16 Q. Okay.
 17 A. I don't know. Perhaps there are
 18 other grants that were funded --
 19 Q. Uh-huh.
 20 A. -- in some way, shape or form by
 21 manufacturers or distributors. I know that we
 22 have worked with -- they're -- they're --
 23 they're not named as a defendant, but some of
 24 the pharmacies, I think, that are listed in
 25 some of the interrogatories carry the Deterra

Page 172

1 bags for the Summit County Public Health
 2 Department.
 3 But I'm not aware of any specific
 4 formal request to any of the Defendants, other
 5 than the public health grant with Cardinal that
 6 we've made.
 7 Q. What's a Deterra bag?
 8 A. It's -- essentially it looks like a
 9 foil, probably 5 inches by 8 or 10 inches, that
 10 you can use at home. It has a carbon --
 11 "science magic" in it.
 12 Q. Uh-huh.
 13 A. Dump the pills in, put a little bit
 14 of water in it, seal it up, and the pills
 15 essentially disintegrate, and it's safe to
 16 dispose of. So it's a safe way to dispose of
 17 your unused medications at home.
 18 Q. Do you know whether Summit County
 19 has ever reached out to any of the Defendants,
 20 either formally or informally, for assistance
 21 in dealing with any other aspect of the opioid
 22 problem, such as a pharmacy that -- or a
 23 problem doctor, anything like that?
 24 A. I'm not aware of any direct
 25 contact.

Page 173

1 Q. Are you aware of any indirect
 2 contact?
 3 A. No. No, I should -- no.
 4 Q. In your -- do you believe that the
 5 State has done as much as it should to help
 6 combat the opioid problem?
 7 A. Well, the State didn't create the
 8 opioid problem. So my opinion on their
 9 response to it, I think, could have been
 10 swifter or more robust, but they didn't create
 11 this problem.
 12 Q. But you have, in fact, been highly
 13 critical of the State's response, have you not?
 14 MS. KEARSE: Object to form.
 15 A. I think some people think I
 16 probably wasn't critical enough, but I
 17 certainly was vocal about the need in my
 18 community for a response and for the dollars
 19 that were needed to respond to this crisis.
 20 Q. Did you sponsor a resolution on the
 21 subject in the state legislature?
 22 A. I believe I did, yes. Oh, yes, I
 23 did. Absolutely. Yes, I did.
 24 Q. And what happened to that
 25 resolution?

<p style="text-align: right;">Page 174</p> <p>1 A. Oh, it went absolutely nowhere. 2 Yes. 3 Q. And why was that? 4 A. Well, it was sponsored by myself 5 and two other Democrats, and we were -- it's an 6 essential super minority in the state House. 7 So outnumbered three to one without a 8 Republican sponsor, I don't believe we even got 9 a first hearing on it. 10 Q. Were the -- was the Republican 11 majority hostile to the idea? 12 MS. KEARSE: Object to form. 13 A. I mean, hostility can take many 14 forms, and silence is one of them. So to me, 15 as the representative serving Summit County, 16 there was a lack of response that was being 17 felt by the people in this community. They 18 felt that this epidemic should have been the 19 number one priority at that time, and there was 20 a -- 21 The State was doing things. The 22 State was working on it. But you have to 23 understand, in 2016, when I sponsored that 24 resolution, people's kids were dying, and dying 25 in my district specifically. I represented the</p>	<p style="text-align: right;">Page 176</p> <p>1 more money in our medical examiner's office. 2 We had to bring up the mobile 3 morgue five times in 2016, and that costs 4 money. We had to send out all these samples 5 from the medical examiner's office to be tested 6 because we didn't have the right equipment, 7 this \$300 -- \$300,000 machine to test this. 8 So I wanted more attention paid to 9 my constituents. I had a platform, and -- and, 10 yes, I wish there had been more time and money 11 and talent and treasure spent on it, but it 12 wasn't the State's fault. 13 Q. If the State had done more, would 14 it have helped the situation? 15 MS. KEARSE: Object to form. 16 A. It may have mitigated some part, 17 but we were already in a crisis. I mean, 18 again, there was this decade-long head start 19 where these people were so deeply addicted, 20 throwing a million dollars at their feet may 21 not have saved them. My -- 22 Q. So you're saying that it wouldn't 23 have made any difference? If the State had -- 24 A. I don't know. 25 Q. -- helped more, it wouldn't have</p>
<p style="text-align: right;">Page 175</p> <p>1 number one ZIP code for overdose in Summit 2 County, and I literally couldn't go anywhere 3 without somebody telling me about their kid. 4 And so hostility? I would have 5 been grateful to have a conversation about it. 6 Because the State didn't create this problem, 7 but I do believe that they had an obligation to 8 respond to the needs of the citizens, and I 9 felt like more response was warranted. But I 10 don't lay the blame for people dying at the 11 State's feet. 12 Q. If the State had done more, would 13 it have helped the situation? 14 MS. KEARSE: Object to form. 15 A. The opioid crisis had a decade head 16 start on us. People were so deeply addicted 17 and were so deeply affected by this epidemic 18 that, yeah, I wanted the governor to dump 19 millions of dollars into Summit County. We 20 still would have had people dying. We still 21 did have people dying. I mean, we still do 22 have people dying every -- every day. Not 23 nearly at the rate they were dying, luckily, in 24 2016. But, you know, we needed more treatment 25 beds. We needed more caseworkers. We needed</p>	<p style="text-align: right;">Page 177</p> <p>1 made any difference? 2 A. I don't know. 3 I know that when I was saying those 4 things and sponsoring that, that that was the 5 amplification of the voices of my community. 6 It's -- you know, it's not a 7 secret, as I sit here, as I've told you, 8 that -- that resolution wasn't going to go 9 anywhere, and I knew that. I didn't introduce 10 it to -- with the expectation it would pass. I 11 introduced it with the expectation that the 12 people in Summit County would feel that someone 13 in the state House was hearing them and 14 responding to them, because -- 15 I don't know where you're from, but 16 in Summit County it was the most desperate time 17 I have ever seen, and I have lived here for 18 over 20 years. Every day of my adult life I 19 have lived in Summit County. People were so 20 desperate for anything. It was that time to 21 throw everything at the wall to see what 22 sticks, because that's how critical the 23 casualties were coming. 24 Q. Are there any laws, policies, or 25 procedures that restrict the discretion of law</p>

Page 178

1 enforcement officers or prosecutors to
 2 investigate or pursue individuals for
 3 opioid-related misconduct?
 4 A. Boy, that was a long one.
 5 Q. Yep.
 6 MS. KEARSE: I'll object to the
 7 form.
 8 A. Okay.
 9 Q. I -- I think that's fair. Let
 10 me --
 11 A. Okay.
 12 Q. Let me try it again.
 13 A. Okay.
 14 MS. KEARSE: I was going to ask to
 15 break for lunch soon.
 16 Q. Are there any laws, policies, or
 17 procedures --
 18 A. Okay.
 19 Q. -- that restrict the discretion --
 20 let's just start with law enforcement -- to
 21 investigate or arrest individuals for
 22 opioid-related misconduct?
 23 A. I mean, HIPAA is in place. I mean,
 24 you can't, you know, ask someone to divulge
 25 their medical history.

Page 179

1 I -- I guess I'm not -- is that
 2 what you're asking? I don't -- I don't --
 3 Q. I'm asking if there's anything --
 4 A. I don't know --
 5 Q. -- that gets in the way.
 6 A. Well, certainly. I mean --
 7 Q. In terms of laws, policies, or
 8 procedures.
 9 A. -- every investigation into a
 10 diversion case starts with this blanket of
 11 legality, and additionally, this inherent
 12 community trust of the pharmaceutical industry.
 13 As a community, Summit County
 14 trusted that what was being manufactured,
 15 distributed, and prescribed to them and to
 16 their family members was safe.
 17 So what stood in the way originally
 18 was we didn't know. And --
 19 Q. Go ahead.
 20 A. -- when -- when you add in that
 21 layer of sort of this inherent respect of
 22 doctors and -- and you've got police officers
 23 who are used to investigating drug dealers who
 24 stand on street corners and peddle crack,
 25 there's a different -- there's a different

Page 180

1 strategy to that, that requires probably
 2 more --
 3 It requires a different strategy to
 4 investigate a doctor who you suspect of -- of
 5 prescribing outside of -- of what they should
 6 be doing versus somebody who is inherently
 7 doing illegal activity. There's no
 8 protections. They are not licensed to
 9 distribute, and all of the drugs they're
 10 distributing are classified as illegal to begin
 11 with.
 12 Q. So what you're saying is that when
 13 you refer to the blanket of legality, is that
 14 doctors are legally authorized to prescribe
 15 opioids to people?
 16 A. Right.
 17 MS. KEARSE: Object to form.
 18 A. And their -- that's part of their
 19 job, essentially, is what a community believes.
 20 And that, I think, stretches to the
 21 distributors and manufacturers of the
 22 medications that are being prescribed, this
 23 inherent trust that when I go to the doctor,
 24 the doctor is smart and has all the good
 25 information and is going to give me something

Page 181

1 that's going to help me and -- and won't cause
 2 me harm in the future.
 3 Q. Well, but I -- I -- I'm not talking
 4 about anything that gets in the way. I'm just
 5 talking specifically about laws or policies.
 6 A. I feel like you said hurdles, and
 7 so that was where I went to.
 8 Q. No. Laws or policies that are
 9 hurdles to restricting the discretion of law
 10 enforcement to investigate diversion.
 11 You mentioned HIPAA. Is there
 12 anything else?
 13 A. Yeah. I mean, I think early on,
 14 the -- the lack of access to good OARRS
 15 information, which changed, so I guess that was
 16 a law that was tweaked to give them better.
 17 So, prior to, wasn't as good as.
 18 Beyond that, I -- I -- I don't know
 19 how to answer the question beyond that.
 20 MS. KEARSE: Is this a good time to
 21 break for lunch?
 22 MS. WINNER: Sure.
 23 THE VIDEOGRAPHER: Off the record
 24 at 12:21.
 25 (A recess was taken.)

Page 182

1 - - - - -
2 (Thereupon, Deposition Exhibit 9,
3 12/12/2018 Letter from Atty Anne
4 Kearse to Atty Sara Roitman, was
5 marked for purposes of
6 identification.)
7 - - - - -
8 THE VIDEOGRAPHER: On the record at
9 1:10.
10 MS. WINNER: Is there anybody on
11 the phone who has not yet entered an
12 appearance?
13 (No response.)
14 MS. WINNER: Hearing nothing, we
15 will go forward.
16 I have asked the reporter to mark
17 as Exhibit 9 a letter from Anne Kearse to Sara
18 Roitman dated December 12, 2018. And I'm
19 mostly just marking this for the record.
20 And, Ms. Kearse, I'm asking you if
21 you will confirm that this letter accurately
22 lists the topics on which this witness has been
23 designated, with the exception of 4, 5, 6, and
24 19, which need to be added to the list?
25 MS. KEARSE: Yeah, to the extent

Page 183

1 I'm not being deposed today, but I believe this
2 is accurate.
3 MS. WINNER: Okay. Well --
4 MS. KEARSE: With the -- no,
5 this -- this should be -- I -- I didn't look at
6 what else -- I wasn't looking at Wendy and -- I
7 was just looking at the notice today for Greta
8 Johnson.
9 MS. WINNER: Yeah, that's the only
10 one I'm focusing on.
11 MS. KEARSE: Yeah. So that is my
12 understanding, that's accurate except for the
13 written -- the 4, 5, 6, 19. Yep.
14 MS. WINNER: Those -- those would
15 need to be added to the ones that are listed
16 here for Greta Johnson, correct?
17 MS. KEARSE: Yes. Because I
18 suggested we do those in written form, and --
19 and you did not want to take me up on that
20 offer, so.
21 MS. WINNER: Thank you. Just
22 wanted to make sure our record was clear on
23 which topics she's here on.
24 BY MS. WINNER:
25 Q. Ms. Johnson --

Page 184

1 A. Yes.
2 Q. -- prescription opioids are
3 controlled substances, correct?
4 A. Yes.
5 Q. And because they're controlled
6 substances, a patient cannot legally get an
7 opioid without a prescription; is that correct?
8 A. That's correct.
9 Q. And only certain licensed medical
10 professionals, like doctors and dentists and
11 nurse practitioners, are allowed to write
12 prescriptions, correct?
13 A. Correct.
14 Q. And in order to write a
15 prescription for a controlled substance, a
16 practitioner has to have a license from the
17 State and from -- and from the DEA, correct?
18 A. That's my understanding.
19 Q. Now, individuals who are addicted
20 to opioids often have mental health disorders,
21 correct?
22 MS. KEARSE: Object to form.
23 A. I think there's a prevalence of
24 dual diagnosis, certainly, of addiction and
25 mental health. They can go hand in hand,

Page 185

1 certainly.
2 Q. Is it common for individuals who
3 are addicted to opioids to be addicted to more
4 than one substance?
5 A. I don't know a percentage, but I
6 don't think that's an unfair statement. I
7 think that different substances can certainly
8 play a role. We talked about people using
9 different ones before. Yes.
10 Q. Do people sometimes use alcohol and
11 opioids?
12 A. Yes.
13 Q. And do people -- are there some
14 people who are addicted to alcohol before they
15 become addicted to opioids?
16 A. I'm sure there are.
17 Q. All right. I want to turn now to a
18 different subject. Some of our different
19 topics.
20 A. Okay.
21 Q. And you've been designated to
22 testify about the harms that the Plaintiffs
23 have suffered and their efforts to mitigate
24 them. And I just want to start off, you -- you
25 personally have been quoted in the press as

<p style="text-align: right;">Page 186</p> <p>1 saying that Summit County has spent nearly 2 \$200 million during the past decade trying to 3 keep up with the cost of addiction. Do you 4 remember giving that statement? 5 A. I remember that statement occurring 6 a couple of different times from myself and 7 from the executive. And it has spanned -- I 8 think we talked about \$66 million within the 9 last four or five years. We've talked about 10 \$150 million dollars up to a quarter billion 11 dollars. Different numbers have been used sort 12 of as we really take a deeper dive into what it 13 truly has cost, financially, the County. 14 Q. Well, where does that -- how is 15 that 200 -- how did you come up with that \$200 16 million figure? 17 A. So -- 18 MS. KEARSE: I'm going to let you 19 answer the question. 20 I'm going to -- I'm going to put an 21 objection down. She's going to be able to 22 testify about things that have been put out 23 there in the public, but if it's going into a 24 damages or more in-depth, Brian Nelson is the 25 30(b) representative for --</p>	<p style="text-align: right;">Page 188</p> <p>1 again, like I said, my recollection is, what 2 are we looking at here on -- I call it on the 3 eighth floor versus countywide. 4 Q. Well, the -- am I correct in -- 5 from what you just said that -- that you do 6 not, yourself, know how the \$200 million figure 7 was calculated? 8 A. I know that those -- those things I 9 just talked about, some of those things are 10 what was looked at. Brian and I have discussed 11 that we've -- you know, that was sort of our 12 original thought, like what should we start 13 looking at. 14 I'm not sure when it morphed from 15 66- to 150- to 200-, to 250-, because it, quite 16 frankly, I think if we looked even today, we'd 17 find even more dollars being spent. 18 Q. Do you know what specifically is 19 and is not included in the 200 million figure? 20 A. I don't. 21 Q. All right. If you look at the note 22 that -- the notice, which was Exhibit 1 today, 23 and look at Topic 10. 24 Topic 10 is "The harms that 25 Plaintiff has incurred from the promotion,</p>
<p style="text-align: right;">Page 187</p> <p>1 MS. WINNER: Understand that. 2 Thank you. 3 A. So the -- the reason I've had those 4 numbers and have put those out there is as the 5 chief information officer, I deal with the 6 press and I write a lot of the speeches for the 7 executive. I always get the numbers directly 8 from Brian Nelson. I rarely, if ever, know 9 where to start without talking to him first. 10 And I know that when we first 11 started trying to take a look at that, we 12 looked really in-house what we were spending on 13 medical examiner costs, what we were spending 14 on indigent defense, monies that we were trying 15 to seek for drug court. So I consider those 16 in-house as far as the executive's office. 17 And then we really began to look 18 outside of our own house at, countywide, the 19 amount of money ADM was spending, the amount of 20 money the health department was spending, and 21 the number of dollars being used up at 22 Children's Services. And that's not to speak 23 of, you know, the -- the costs of the treatment 24 being provided and that sort of thing. 25 So those numbers started out --</p>	<p style="text-align: right;">Page 189</p> <p>1 marketing, distribution, dispensing and/or 2 diversion of prescription opioids." 3 Do you see that? 4 A. I do. 5 Q. And I'm going to take you in a 6 minute and we're going to go into some of the 7 specifics, but my first question for you is, is 8 the list of harms that you would come up with 9 different for any of the individual activities 10 that are listed here, promotion, marketing, 11 distribution, dispensing and/or diversion? 12 MS. KEARSE: Object to form. 13 A. No. This looks at the aggregate 14 harm caused in this instance, and that's -- 15 that's what I feel most comfortable talking 16 about in the aggregate. 17 Q. Okay. Have you made -- and again, 18 we're going to get into the specifics -- 19 A. Sure. 20 Q. -- in a minute, but have you made 21 any effort to consider whether the list would 22 be different for any of the individual 23 activities that are listed -- 24 A. I have not. 25 Q. -- here?</p>

<p style="text-align: right;">Page 190</p> <p>1 Have you thought about it?</p> <p>2 A. No. Again, to me, it is an</p> <p>3 aggregate harm to the community.</p> <p>4 Q. All right. I'd like you to pull</p> <p>5 back out --</p> <p>6 MS. WINNER: Oh, no, we didn't. I</p> <p>7 thought we already marked this. Did we mark</p> <p>8 this already? I thought we did mark this.</p> <p>9 Could I just see the --</p> <p>10 THE WITNESS: Sure.</p> <p>11 MS. WINNER: -- exhibits quickly?</p> <p>12 My apologies.</p> <p>13 THE WITNESS: I'm sorry. They're</p> <p>14 not in order.</p> <p>15 MS. WINNER: That's all right.</p> <p>16 You're not required to keep them in order.</p> <p>17 MS. KEARSE: You're working hard</p> <p>18 enough.</p> <p>19 MS. WINNER: Oh, here it is,</p> <p>20 Exhibit 7. I think this is Exhibit 7.</p> <p>21 Q. If you pull out Exhibit 7.</p> <p>22 A. Sure.</p> <p>23 Q. And look at page 14.</p> <p>24 A. Okay.</p> <p>25 Q. And you see at the bottom there's</p>	<p style="text-align: right;">Page 192</p> <p>1 to have suffered in this case?</p> <p>2 A. Okay. Let me take a look.</p> <p>3 Q. Sure. Go ahead.</p> <p>4 A. I've reviewed it. Could you</p> <p>5 restate the question?</p> <p>6 Q. Sure. Is this an accurate list of</p> <p>7 the injuries that Summit County claims to have</p> <p>8 suffered in this case?</p> <p>9 A. I -- I feel that it's missing some</p> <p>10 of the major losses that we've incurred.</p> <p>11 Q. Okay. What's missing? I want to</p> <p>12 go back through the list, but before we do</p> <p>13 that, why don't you tell me what's missing from</p> <p>14 the list.</p> <p>15 A. The loss of human capital. And</p> <p>16 certainly there's not a dollar figure you can</p> <p>17 put on the thousands of lives we've lost.</p> <p>18 Q. Is that an injury for which Summit</p> <p>19 County is seeking damages in this case?</p> <p>20 A. It is, because we're seeking</p> <p>21 damages due to the total harm caused by this</p> <p>22 epidemic. The loss of life that really</p> <p>23 exploded in 2016 created another loss, and that</p> <p>24 was a loss of a sense of community. And when</p> <p>25 you talk about the aggregate harm, that is a</p>
<p style="text-align: right;">Page 191</p> <p>1 Interrogatory 18 --</p> <p>2 A. I do.</p> <p>3 Q. -- which asks for categories of</p> <p>4 injury.</p> <p>5 A. Uh-huh.</p> <p>6 Q. And then for some other</p> <p>7 information. But then -- if you then go to the</p> <p>8 response, and there's a bullet point list of</p> <p>9 categories of injury.</p> <p>10 Do you see that?</p> <p>11 A. I do.</p> <p>12 Q. Do you -- is this one of the</p> <p>13 interrogatory answers that you reviewed?</p> <p>14 A. It is.</p> <p>15 Q. Does this list look familiar to</p> <p>16 you?</p> <p>17 A. Yes. Sorry.</p> <p>18 MS. WINNER: Are you okay? Do you</p> <p>19 need a break?</p> <p>20 THE WITNESS: No, I'm okay.</p> <p>21 Q. As you understand it, does -- is</p> <p>22 this a -- does this -- is everything on this</p> <p>23 list -- let me strike that.</p> <p>24 Is this a -- an accurate list of</p> <p>25 the injuries that Summit County has -- claims</p>	<p style="text-align: right;">Page 193</p> <p>1 harm that we will be trying to recover from for</p> <p>2 decades.</p> <p>3 To declare a state of emergency in</p> <p>4 Summit County was not something that was easily</p> <p>5 reached, because it sends an alarm bell to</p> <p>6 businesses and to people seeking to relocate</p> <p>7 that we have a problem. And we're no different</p> <p>8 than anyone else, but we were the grownups in</p> <p>9 the room enough to acknowledge what the problem</p> <p>10 was and use the platform of the executive's</p> <p>11 office to bring attention to it.</p> <p>12 So the losses that are monetized</p> <p>13 certainly here, I know that Brian can speak to</p> <p>14 those directly and that Ms. Miller-Dawson can</p> <p>15 as well.</p> <p>16 But the aggregate loss is -- is not</p> <p>17 limited to what you can put on a paper. The</p> <p>18 overwhelming sense of hopelessness that took</p> <p>19 over this community in 2016, you can't monetize</p> <p>20 that. Every single day the newspaper was</p> <p>21 reporting on the overdose death rates. You</p> <p>22 could not go into a community setting where</p> <p>23 there were not weeping mothers talking about</p> <p>24 their children.</p> <p>25 So you asked me before if I had</p>

<p style="text-align: right;">Page 194</p> <p>1 personal contact with it, and I'm lucky. I'm 2 lucky in that my family has not. But it is 3 personal to me when parents and community 4 members come to their government looking for 5 answers, looking for help, those can't be 6 monetized. Those can't be bullet-pointed, 7 because that loss of human capital and the loss 8 of trust in the community, in doctors, in 9 patient care, because they know now how their 10 kids started. They know what caused this, 11 and -- and that is a harm that this community 12 will be trying to rebuild for decades. 13 Q. Okay. Ms. Johnson, what I'm asking 14 you right now is whether there are any injuries 15 for which Summit County is seeking damages in 16 this case that are not listed in the response 17 that appears on pages 15 to 17 of this exhibit. 18 A. The medical -- 19 (Telephonic interruption.) 20 MS. WINNER: If you're on the 21 phone, if you would please put yourself on 22 mute. 23 A. Are the increased costs to the 24 medical examiner's office listed here? 25 Q. I'm sure it is. If not, we'll come</p>	<p style="text-align: right;">Page 196</p> <p>1 The other part of that, opioid 2 epidemic that impacts that, is that we have 3 created a new class of felons who cannot seek 4 certain employment and might not be able to 5 seek the employment they had prior to falling 6 victim to addiction. 7 So I think there's -- there is a 8 loss that's beyond just the physical presence 9 of people we've lost, but also the ability of 10 people to work in certain fields because of the 11 felonization of -- of this epidemic. 12 Q. Anything else that's not on the 13 list? An injury for which Summit County seeks 14 damages in this case? 15 A. I think it could be argued that -- 16 the very last bullet point is cost for child 17 services and foster care for opioid-dependent 18 babies and foster children, so that's just a 19 really small portion of it. 20 Our -- our Children's Service Board 21 had to seek an increase in their levy this 22 year. And levy campaigns cost money. And the 23 driving factor behind the request for increase 24 is the opioid epidemic. And so the costs of 25 that campaign really to try and support this</p>
<p style="text-align: right;">Page 195</p> <p>1 back to it. 2 A. The other costs that I think should 3 be reflected -- and again, probably tough to 4 monetize -- is the compassion fatigue that our 5 first responders and treatment providers are 6 incurring, and sort of the resources that we're 7 trying to put toward that effort of making sure 8 that those folks are supported, that they don't 9 become overwhelmed by hopelessness, and that 10 they don't become overwhelmed by the sheer 11 volume and turn cold to it. 12 So there have been efforts to try 13 and address that, both through the medical 14 community and through the first responder 15 community and all of those things. Any time 16 there's an investment of time, there's an 17 investment of treasure, and I think that that 18 is something that's missing. 19 Q. Anything else? 20 A. I think that there's also -- the 21 portion that talks about the loss of tax 22 revenue due to the decreased efficiency and 23 size of the working population, I read that as 24 we had a lot of people die, so our population 25 decreased.</p>	<p style="text-align: right;">Page 197</p> <p>1 fundamental service I feel like could be 2 included with the Children's Services portion. 3 Q. Anything else? I'm not asking you 4 to explain anything that's here. I'm going to 5 go -- 6 A. Sure. 7 Q. -- through each item that's on the 8 list. I just wanted to know if there's 9 anything else that's not on the list. 10 A. I don't see anything that's 11 standing out right now. 12 Q. Okay. Well, let's go back to the 13 top of the list, then. 14 A. Okay. 15 Q. The first item is, "Losses caused 16 by the decrease in funding available for 17 Plaintiff's public services for which funding 18 was lost because it was diverted to other 19 public services designed to address the opioid 20 epidemic." 21 What public services -- for what 22 public services was funding lost because it was 23 diverted to other public service? 24 A. Well, specifically in Summit County 25 we have deferred capital improvements. We've</p>

<p style="text-align: right;">Page 198</p> <p>1 deferred, you know, what I would call 2 enhancement projects, things meant to enhance 3 our community because our resources were 4 laser-focused on the opioid epidemic. 5 So where public health, for 6 instance, really would like to spend their time 7 promoting this T21 initiative that they have, 8 eliminating the ability for our youth to buy 9 tobacco products. A lot of science behind how 10 tobacco can change your brain makeup and how 11 it's important to not do that at an early age. 12 I know that that is an initiative they take 13 really seriously and wanted to promote, but it 14 really takes a back seat to the opioid 15 strategies and -- and programs. 16 Additionally, in Summit County 17 we've got health issues like anyone else. I 18 didn't know that diabetes was such a huge 19 health issue in Summit County. It is. It's 20 our number one health issue, outside of 21 addiction, that -- that public health was 22 targeting. And -- and all of those things get 23 pushed to the side. Those important community 24 initiatives get pushed to the side, because 25 when people are dying immediately, you know,</p>	<p style="text-align: right;">Page 200</p> <p>1 perform several autopsies for outside agencies 2 for cost, and that was a stream of revenue that 3 we were able to help fund some of -- of the 4 operations there. Can no longer do that 5 because we don't have the capacity to do it, 6 and our -- and the funds there have to go to 7 what's happening in front of them. 8 I know that we have used grant 9 dollars to help support the expansion of our 10 drug courts, that perhaps those dollars could 11 have been used in a prevention setting or could 12 have been used for some other law enforcement 13 purpose, but because of the need for increased 14 capacity in drug courts, we -- we have 15 designated grant dollars for that as well. 16 And -- and likewise, those judges, 17 their time that would normally have been spent 18 on a variety of different cases is focused 19 on -- on drug cases, and certainly a huge 20 percentage of which are opioids. 21 I'm trying to go around the county 22 in my mind. 23 I -- that's -- that's -- I think 24 that's where I'm at on that. 25 Q. Well, you said -- let me take you</p>
<p style="text-align: right;">Page 199</p> <p>1 it's -- it's all hands on deck for that. 2 Q. So -- 3 A. Obvious- -- 4 Q. Go ahead. 5 A. With law enforcement, we have 6 detectives who are, you know, responding to 7 overdose cases frequently. And those, as we've 8 discussed, are incredibly difficult to 9 investigate for a myriad of reasons, and their 10 time is, therefore, tied up in those cases 11 rather than, you know, folks who have had their 12 home burglarized or their car stolen. 13 And we also have a lot of our 14 resources being put into things like our Quick 15 Response Teams that we never had to do before, 16 but we know that Quick Response Teams are 17 effective, and so we put money toward them. So 18 the number of other things that don't get the 19 attention or the money that they typically 20 would or should get because we're busy trying 21 to save people's lives with -- with these 22 efforts. 23 I know that in the medical 24 examiner's office we have lost a stream of 25 revenue. Our medical examiner's office used to</p>	<p style="text-align: right;">Page 201</p> <p>1 through some of these. This was -- has money 2 been taken away -- that was already allocated 3 to T21 taken away from it? 4 A. I don't know that money was taken 5 away, but certainly focus. 6 Q. How about money that was dedicated 7 to diabetes, whatever was going to be done 8 about diabetes, has anything been taken away 9 from that? 10 A. I -- again, I think where you've 11 got time invested, you know, from people, 12 that's money. So when you take people off of, 13 you know, particular initiatives and refocus 14 them on something else, that is a diversion 15 of -- probably not the right word -- that's a 16 shift in dollars. 17 Q. Were specific people taken off 18 diabetes? 19 A. I don't know that for sure. I just 20 know that that's not something that they are 21 focused on. I shouldn't say that. That's 22 unfair. 23 I know that what is coming out of 24 public health frequently, and investments of 25 new dollars are going into are ways to mitigate</p>

<p style="text-align: right;">Page 202</p> <p>1 harm, harm -- harm reduction for the opioid 2 crisis. 3 Q. Okay. What -- but this bullet 4 point talks funding being diverted to other 5 public services -- 6 A. Right. 7 Q. -- so my question is, what was 8 their -- what was the specific funding or -- or 9 resources, whether it was particular people, 10 that -- that was supposed to be -- you know, 11 was allocated out for diabetes and got diverted 12 elsewhere? 13 A. I don't -- I don't know how to 14 specifically answer what was allocated for 15 diabetes, but I know we spent \$10,000 on 16 fentanyl strips. \$10,000 that could have been 17 spent on diabetes prevention. \$10,000 that 18 could have been spent on T21. But because harm 19 reduction is so critical in our community, 20 \$10,000 was spent on fentanyl strips. 21 The increase in dollars that are 22 being spent on the needle exchange. Certainly 23 those are dollars that weren't previously being 24 spent on needle exchange, but because the 25 demand is so high and the harm reduction</p>	<p style="text-align: right;">Page 204</p> <p>1 overdoses. 2 Q. Are there any -- is -- is the -- is 3 Summit County seeking damages in this case for 4 injuries suffered by the City of Akron? 5 THE WITNESS: Thank you. 6 A. Well, I mean, we don't -- we are 7 separate entities, certainly. Akron's in 8 Summit County, and what happens in Akron does 9 affect Summit County. So an arrest that's made 10 in the City of Akron by Detective Leonard, that 11 becomes a Summit County case. It's a felony. 12 So the City of Akron arrest goes 13 through Akron Municipal Court, comes to Summit 14 County Common Pleas court, goes through our 15 prosecutor's office, goes through our Common 16 Pleas court system, our drug court. Our ADM 17 provides services. Our health department 18 provides services. 19 So we're certainly separate 20 entities, but what happens with nearly half of 21 our population impacts what goes on in Summit 22 County. 23 Q. Is Summit County seeking damages in 24 this case for injuries suffered by the City of 25 Akron?</p>
<p style="text-align: right;">Page 203</p> <p>1 benefit of that is so great, that those dollars 2 are not being spent on those other things. 3 Q. What -- in a -- in a law 4 enforcement category, you say that there are 5 people who are investigating over- -- 6 overdoses. Were those people who were 7 previously assigned to do something else 8 specifically, and if so, what? 9 A. Well, there are two detectives in 10 the Summit County Sheriff's Office who are 11 general division detectives, but they respond 12 to any fatal overdose scene. So that means 13 they leave their desk and whatever rape, 14 robbery or homicide they're working on and 15 their attention has to be focused on -- on this 16 overdose. 17 I know the City of Akron had two 18 detectives who were working in, you know, 19 the -- the drug unit who were earmarked 20 specifically to investigate overdose deaths 21 because there were so many. 22 That's to say nothing of all of the 23 other police officers throughout the county who 24 would be proactively policing and are spending 25 lots of time on calls for service regarding</p>	<p style="text-align: right;">Page 205</p> <p>1 MS. FLOWERS: Objection. Asked and 2 answered. 3 A. We're -- we're both independently 4 seeking our own damages, is the way I 5 understand the -- the case. 6 Q. So if the -- if the City of Akron 7 police department suffers an injury, that's not 8 part of the injury for which Summit County is 9 seeking damages, correct? 10 MS. KEARSE: Objection. 11 A. Again, it's tough because you get 12 arrested in the city of Akron, you're coming to 13 the Summit County Jail. So I -- I know that 14 they're -- that we're seeking -- we're two 15 separate plaintiffs, certainly, but the 16 aggregate harm, to me, is what I always come 17 back to. 18 You know, I will leave to the 19 lawyers to make the determination of -- of 20 where that line separates, but to me it's 21 difficult for me to separate out what happens 22 in Akron from what happens in Summit County 23 because they're the same thing. Everything in 24 Akron is in Summit County. 25 Q. Is the --</p>

<p style="text-align: right;">Page 206</p> <p>1 MS. KEARSE: And, Counselor, just 2 again for the record, we've got 30(b)(6) 3 representatives who are going to go 4 specifically to the dollar figures for the City 5 of Akron and for the County of Summit, so I 6 think those questions are probably more 7 appropriate for the 30(b)(6) representatives 8 who will deal specifically with the costs and 9 dollars associated with the recovery. 10 Q. Are there any statistics maintained 11 or -- by Summit County concerning any changes 12 in law enforcement activities in areas other 13 than drug enforcement that you attribute to the 14 opioid problem? 15 A. I'm sorry. Could you say that 16 again, please? 17 Q. Sure. Are there any statistics 18 maintained by Summit County concerning any 19 changes in law enforcement activity in areas 20 other than drug enforcement that you attribute 21 to the opioid problem? 22 MS. KEARSE: Object to form. 23 A. I -- I feel like I'm -- I'm sorry. 24 I feel like I'm still missing it. Changes 25 in --</p>	<p style="text-align: right;">Page 208</p> <p>1 counties? 2 A. Yes. 3 Q. Okay. So this is just -- this is 4 just a money-making proposition for the County 5 that you're not able to do anymore; is that 6 right? 7 MS. KEARSE: Object to form. 8 A. Yeah, it wasn't just about making 9 money. We have highly skilled physicians who 10 have different certifications in our medical 11 examiner's office. I believe Dr. Kohler is 12 one of only -- it's either 150 or 200 in the 13 country with certain qualifications. So often 14 her expertise was helpful in difficult cases. 15 Q. Well, and the -- the Quick Response 16 Teams, were the- -- are these people who were 17 diverted from other activities, and if so, 18 what? 19 A. Well, any time a police officer is 20 responding to an overdose, they're not 21 proactively policing. They're not being 22 present in the community. They're taken out of 23 the community for a specific purpose. So 24 again, it's one of those it's hard to quantify 25 because it's the stuff you don't catch.</p>
<p style="text-align: right;">Page 207</p> <p>1 Q. Well, you say that -- you say that 2 these people who were investigating drug 3 overdoses are not investigating something else. 4 Was there -- are there any statistics that are 5 maintained on what other crime is out there 6 and -- and whether it's being addressed at a 7 different level than it was before? 8 A. I see what you're saying. 9 Certainly the -- the sheriff's 10 department has its annual report, as does the 11 Akron Police Department. 12 But again, it's hard to measure the 13 crime we don't catch. We're so focused on 14 opioids and the havoc that they have caused 15 that it would be difficult to graph the crime 16 that they're not catching because of the -- the 17 attention being paid to opioids. 18 Q. Do you know whether clearance rates 19 have changed? 20 A. I don't know that. I -- I don't -- 21 I don't know that. 22 Q. Now, you said that the medical 23 examiner's office is no longer able to earn 24 income for doing autopsies for other people, 25 for other counties. Was that, like, other</p>	<p style="text-align: right;">Page 209</p> <p>1 But any time a police officer is 2 dispatched as a part of a QRT, that's a police 3 officer who's not enforcing traffic laws. 4 That's a police officer who's not able to 5 respond to a domestic violence call. It's -- 6 it's more officers who have to respond solo and 7 without, you know, a second officer present to 8 those types of cases. 9 Q. And -- and again, am I correct that 10 you're not aware of any statistics, hard 11 statistics, about the activities that those 12 officers did not do because they were involved 13 in the Quick Response Teams? 14 A. No. It's hard to quantify what you 15 didn't do, I guess. 16 Q. All right. Then you say there that 17 you used grant dollars for drug court 18 expansion. 19 A. Uh-huh. 20 Q. So this was grant -- grant dollars 21 received from a third party? 22 A. From the federal government. 23 Q. From the federal government. Okay. 24 So this is not -- this is not Summit County tax 25 money you're talking about?</p>

<p style="text-align: right;">Page 210</p> <p>1 A. No, but they're dollars that might 2 have otherwise been used for other 3 opportunities in the County. 4 Q. Were -- was that in the grant 5 documents? Is that money tailored for other -- 6 excuse me -- targeted for other uses? 7 A. That was a DOJ grant that was -- I 8 don't -- it was not specifically for drug 9 courts, but it was fashioned by Summit County 10 employees in an effort to make our needs meet 11 the requirements of the grant, as I recall. 12 Like, it was a pretty broad one. 13 You could apply for many different reasons. 14 But as I recall, it was -- we tailored it to -- 15 to expand drug court. 16 Q. Well, and you don't -- I take it 17 you don't know -- you don't know you would 18 have -- you would have received the grant for a 19 different use for those same funds? 20 MS. KEARSE: Object to form. 21 A. I mean, I can't predict the federal 22 government. I don't think anybody can these 23 days. So, no, I couldn't say that we would 24 have gotten it or not. 25 Q. All right. I think we've covered</p>	<p style="text-align: right;">Page 212</p> <p>1 coordinate efforts and leverage funds, and 2 those are, you know -- personally those are 3 hours that were not spent doing things that 4 could have enhanced our community. Those 5 are -- those are hours that were spent 6 specifically doing things that we would not 7 have been doing had this epidemic not taken 8 place in Summit County. 9 So public services is -- I guess I 10 sort of was just thinking police, but certainly 11 all of the public servants who work for the 12 County, in addition to public health and ADM, 13 have diverted our personal resources to this 14 issue. 15 Q. Have you tracked the -- the 16 hours -- 17 A. No. 18 Q. -- that you spent on this? 19 A. I have not. 20 Q. Do you know if anybody else in the 21 County has done that? 22 A. I don't. But certainly I can 23 personally tell you I have spent what I am 24 confident are hundreds of hours at boards and 25 commission meetings on behalf of the County for</p>
<p style="text-align: right;">Page 211</p> <p>1 the first -- first bullet -- 2 A. Okay. 3 Q. -- pretty thoroughly. 4 Is there anything we have- -- we've 5 failed to cover on the first bullet? 6 I -- so maybe we can move to the 7 second one. "Costs for providing health care 8 and medical care for patients suffering from 9 opioid-related addiction or disease, including 10 overdoses and deaths." 11 A. I'm sorry. If I could go back to 12 the first one. 13 Q. Sure. 14 A. So because of the prevalence of the 15 opioid epidemic -- 16 Q. Uh-huh. 17 A. -- lots of tasks -- task forces, 18 boards, commissions, things like that have 19 sprung up in an effort to educate and -- and 20 promote and -- and treat and combat the whole 21 thing, and a lot of person hours are being 22 devoted to those. So myself, our public safety 23 director, the executive, my staff, the public 24 safety staff have spent countless hours on 25 these boards and commissions trying to</p>	<p style="text-align: right;">Page 213</p> <p>1 this specific purpose. 2 Q. You were not hired specifically by 3 the County for that purpose, correct? 4 A. I was not hired by the County? 5 Q. To -- to deal with opioid issues. 6 Or were you? 7 A. That wasn't the only reason. I -- 8 I think my knowledge of the criminal justice 9 system and my advocacy platform certainly lent 10 itself to the position that the executive hired 11 me at. 12 Q. Did the position that you -- that 13 you were hired for exist before you were hired 14 for it? 15 A. It did the way I was hired. I was 16 hired in as a deputy director of law, and that 17 was a position that existed. 18 January 1st of last year, the new 19 position of assistant chief of staff was 20 created. 21 Q. And then -- and you're also the 22 public spokes- -- 23 A. Correct. Public information 24 officer. 25 Q. Public information officer.</p>

<p style="text-align: right;">Page 214</p> <p>1 A. Yes.</p> <p>2 Q. And that's, I assume, a</p> <p>3 long-standing position?</p> <p>4 A. It is, but it was -- it was held by</p> <p>5 our public safety division, and so it was</p> <p>6 really more of a job that was kicked into gear</p> <p>7 if there was an emergency or a public safety</p> <p>8 issue.</p> <p>9 Q. Has there been any policy or</p> <p>10 practice within the County for people who are</p> <p>11 working on opioid-related issues to track their</p> <p>12 time working on those issues?</p> <p>13 A. No, not that I'm aware of.</p> <p>14 Q. Are we now ready to move --</p> <p>15 A. Yes.</p> <p>16 Q. -- to the second bullet? Okay.</p> <p>17 A. Yes.</p> <p>18 Q. "Costs for providing health care</p> <p>19 and medical care for patients suffering from</p> <p>20 opioid-related addiction or disease, including</p> <p>21 overdoses and deaths."</p> <p>22 Who in the -- what entity within</p> <p>23 the County structure has incurred those costs?</p> <p>24 Or entities?</p> <p>25 A. Well, the ADM Board has certainly</p>	<p style="text-align: right;">Page 216</p> <p>1 A. -- and so we used County resources</p> <p>2 to sort of leverage the transfer of a former DD</p> <p>3 home. All of the DD homes in Ohio have been</p> <p>4 shut down. And so the Summit County DD board</p> <p>5 had this facility that was transferred to the</p> <p>6 Land Bank. I can't recall the dollar amount</p> <p>7 that the Land Bank paid for it. And then we</p> <p>8 invested general fund dollars to rehabilitate</p> <p>9 it so that the folks who were living in this --</p> <p>10 this sober-living transitional housing</p> <p>11 environment would not be left to fend for</p> <p>12 themselves.</p> <p>13 So, you know, general fund is sort</p> <p>14 of the fund of last resort. Those are dollars</p> <p>15 that we use only when we really feel we have</p> <p>16 to, and we certainly felt that that was</p> <p>17 important to provide that care for those --</p> <p>18 those patients, for lack of a better term.</p> <p>19 Q. Well, I'm focusing on the second</p> <p>20 bullet point.</p> <p>21 A. Yeah.</p> <p>22 Q. It says, "The costs for providing</p> <p>23 health care and medical" --</p> <p>24 A. Right.</p> <p>25 Q. -- "care for patients suffering</p>
<p style="text-align: right;">Page 215</p> <p>1 incurred a huge cost and has expended their own</p> <p>2 rainy day reserve funds to address it.</p> <p>3 The public health department</p> <p>4 obviously has spent a lot of money doing that.</p> <p>5 You know, our court system, when</p> <p>6 there are babies born addicted, there are</p> <p>7 caseworkers assigned by CSB, things like that,</p> <p>8 so there are costs associated with that.</p> <p>9 So health care to me is -- is not</p> <p>10 just about, like, what's in the doctor's</p> <p>11 office. Is that fair to go down that road?</p> <p>12 Because the County has very much participated</p> <p>13 in transitional housing for folks recovering</p> <p>14 from opioid addiction.</p> <p>15 Q. Are only people who have opioid</p> <p>16 addiction eligible for transitional housing?</p> <p>17 A. We specifically worked with</p> <p>18 opioid -- there's a specific transitional</p> <p>19 housing program that the County worked with.</p> <p>20 It was the largest transitional housing program</p> <p>21 that centered on men recovering from opioid</p> <p>22 addiction. It was in danger of closing because</p> <p>23 their landlord had put the building up for</p> <p>24 auction --</p> <p>25 Q. Uh-huh.</p>	<p style="text-align: right;">Page 217</p> <p>1 from opioid-related addiction or disease."</p> <p>2 A. I consider treatment health care.</p> <p>3 Q. Okay.</p> <p>4 A. And -- and treatment was being</p> <p>5 provided at the transitional housing facility.</p> <p>6 Q. Okay. So who -- who -- you say the</p> <p>7 ADM Board does some of this.</p> <p>8 A. Yes.</p> <p>9 Q. The public health department --</p> <p>10 A. Yes.</p> <p>11 Q. -- does some of this.</p> <p>12 Does -- is there any other entity</p> <p>13 within Summit County that incurs costs for</p> <p>14 providing health care and medical care for</p> <p>15 patients suffering --</p> <p>16 A. Right.</p> <p>17 Q. -- from opioid-related addiction or</p> <p>18 disease?</p> <p>19 A. So I consider treatment health</p> <p>20 care, and the County contracts with places like</p> <p>21 the Oriana House, the Interval Brotherhood</p> <p>22 Home, the Community Health Center. And if you</p> <p>23 are a person who comes into contact with our</p> <p>24 court system and treatment is part of your</p> <p>25 criminal justice process, we pay for that.</p>

<p style="text-align: right;">Page 218</p> <p>1 Q. Does that go through a particular 2 department?</p> <p>3 A. So we have -- the county of Summit 4 has a direct contract with Oriana House, has -- 5 has some direct --</p> <p>6 Q. Uh-huh.</p> <p>7 A. -- contracts with some of these 8 care providers. And additionally, we also have 9 contracts with ADM, who then contract with 10 Summit Psychological, where health care is 11 provided in the jail and in our residential 12 facilities.</p> <p>13 So any time you have a Summit 14 County inmate who's receiving health care in 15 the jail, certainly we are paying for that as 16 well.</p> <p>17 Q. But not all medical care that 18 people receive in jail is for opioid addiction?</p> <p>19 A. No.</p> <p>20 Q. Do you know what percentage of it 21 is?</p> <p>22 A. I don't. I recall Captain -- or -- 23 yeah, Captain Barker's testimony that there had 24 been an increase. I don't recall if there were 25 percentages in there.</p>	<p style="text-align: right;">Page 220</p> <p>1 that are specific to opioids?</p> <p>2 A. I -- I -- there are -- there's a 3 recovery coaching program that's specific to 4 it, and I know that there are certain 5 requirements for the recovery coaches to be 6 certified and Medicaid reimbursed that 7 essentially require that they're somebody who 8 has lived through recovery, and that is focused 9 on opioid treatment. I -- I feel like the 10 recovery coaches are specific to opioids.</p> <p>11 Q. Anything else?</p> <p>12 A. Again, I -- I'd tell you that Brian 13 would be more able to answer that in- -- into 14 those line items.</p> <p>15 Q. Going back just for a second, 16 something I forgot to ask you about, No. 1, the 17 first -- not No. 1 -- the first bullet point --</p> <p>18 A. Sure.</p> <p>19 Q. -- on page 15 of this exhibit --</p> <p>20 A. Uh-huh.</p> <p>21 Q. -- the loss caused by the decrease 22 in funding because of diversion of funding.</p> <p>23 What -- what time period -- during 24 what time period were these losses incurred?</p> <p>25 A. Well, I think we, again, started to</p>
<p style="text-align: right;">Page 219</p> <p>1 Q. Are -- is -- are the contracts with 2 Oriana House and the others you listed limited 3 to opioid treatment?</p> <p>4 A. No.</p> <p>5 Q. So do they also cover treatment for 6 people who are addicted to other substances?</p> <p>7 A. Correct. They do.</p> <p>8 Q. Does that include alcohol?</p> <p>9 A. Yes.</p> <p>10 Q. Do you know what percentage of it 11 is for opioid addiction?</p> <p>12 A. No, but I know there are some 13 specific programs, because opioid addiction is 14 very different than alcoholism and cocaine 15 addiction, for example.</p> <p>16 Q. Are the contracts for those 17 program -- are those programs subject to 18 separate contracts?</p> <p>19 A. Some of them are, and that would be 20 probably a better question for Brian.</p> <p>21 I know that there are line items 22 that are affiliated with specific programs, but 23 I'm not -- I'm not in the weeds on that as much 24 as he is.</p> <p>25 Q. Do you know what the programs are</p>	<p style="text-align: right;">Page 221</p> <p>1 see the uptick in criminal cases that opioids 2 were the root of. Right? The possessions, 3 deception to obtain, we started to see that 4 uptick in -- you know, prosecutors handling 5 those cases, probation officers monitoring 6 those cases, treatment being sought because of 7 that -- in the late 2000s and early teens.</p> <p>8 And I think it -- it really sort of 9 exploded '15 to '16 when we really were -- were 10 faced with, we have to do everything we can to 11 try to stop the bleeding. And that's -- that's 12 when we saw our medical examiner's office, 13 those types of things, really being impacted.</p> <p>14 And -- and bottom line is -- I don't know that 15 that's the right word, but certainly their 16 budget changed dramatically in '15 and '16.</p> <p>17 Q. The medical examiner office?</p> <p>18 A. Yes, ma'am. Yeah.</p> <p>19 Q. And the -- the diversion of 20 resources for law enforcement that you referred 21 to, is that -- did that occur in the same era?</p> <p>22 A. Yes, I would say so. Again, saw 23 that uptick -- whether it was patrol, arrests, 24 or diversion detectives -- toward the end of 25 the 2000s, beginning of the teens. But really</p>

<p style="text-align: right;">Page 222</p> <p>1 that explosion of and really demand from the 2 public that law enforcement, you know, present 3 them with some response as well. 4 Q. Oh, when did the Quick Response 5 Teams start? 6 A. Those started, I believe, in '15. 7 I believe that there was discussion about them 8 perhaps at the end of '14, right when the 9 Opiate Task Force was forming, but I -- around 10 '15. 11 Q. And the task forces were formed in 12 the 2014-2015 -- 13 A. So the Opiate Task Force that sort 14 of everyone talks about, the one that ADM sort 15 of hosts, that started in 2014. 16 Q. And the diversion of resources that 17 you think could have been spent on T21 and 18 diabetes, was that at the same time? 19 A. The same time and growing. I know 20 that the fentanyl strips were just purchased 21 for the first time last year, so certainly not 22 a cost we had incurred prior to that. 23 Q. Okay. Going back to the second 24 bullet point, then. 25 A. Okay.</p>	<p style="text-align: right;">Page 224</p> <p>1 A. Correct. 2 Q. Oh. So they didn't think an 3 increase was needed in 2013? 4 MS. KEARSE: Object to form. 5 A. I -- I did not have a discussion 6 with the director about that. I think at that 7 time in 2013 we knew we had a problem. We knew 8 families were incurring crisis. I don't think 9 we knew yet that we had an epidemic. 10 Q. Now, you say the funding for the 11 State has decreased for the ADM Board. 12 A. Yes. 13 Q. What's the reason for that? 14 A. Priorities. The administration and 15 the legislature, throughout the last eight 16 years, have had different priorities, and a lot 17 of the -- what was previously in place is what 18 I would call permanent funding, so funding 19 streams, a lot of those dollars have been 20 turned into grants, so non-permanent. 21 The response to requests for more 22 funding has commonly been, "Seek a grant. 23 Here's a grant that might fill that gap for 24 you." 25 So it's a priority. It was not the</p>
<p style="text-align: right;">Page 223</p> <p>1 Q. The costs for providing health care 2 and medical care for patients suffering from 3 opioid-related addiction or disease. 4 A. Uh-huh. 5 Q. For whom does the ADM Board -- oh, 6 first of all, starting with -- starting -- let 7 me start again. 8 A. Okay. 9 Q. The ADM Board, -- has the funding 10 for the ADM Board increased? 11 A. No, it has not. Well, so they're 12 levy-funded mostly, so local dollars mostly 13 fund the ADM Board. Their last levy was six 14 years ago. They are in a levy year this year. 15 So in 2013 they did not seek a renewal at that 16 time, so they've had a flat budget. 17 I know that their funding from the 18 State has increased over the last eight years. 19 But their local dollars, I mean, you know, with 20 the rise and fall of -- of tax receipts. But 21 pretty flat. 22 Q. Why was no renewal sought in 2013? 23 A. No, it was a renewal. It was not 24 an increase. 25 Q. Oh, it was not an increase.</p>	<p style="text-align: right;">Page 225</p> <p>1 number one priority of the administration and 2 the legislature, and perhaps they think that 3 investing in other ways is more beneficial. 4 Q. So the -- when you say the 5 administration, you're talking about the 6 governor and -- 7 A. Yes. 8 Q. -- the State administration? 9 A. Correct. 10 Q. And -- but they have elected to 11 decrease the funding that went to the ADM 12 Board. When did that -- 13 MS. KEARSE: Object to form. 14 Q. When did that decrease occur? 15 A. I think it's been decreasing. 16 There's a biennium budget every two years, and 17 I don't -- I think they were flat budgeted this 18 cycle, but prior to that had faced at least a 19 small decrease every cycle. 20 MS. KEARSE: And I'm also going to 21 say, this line of questioning, there's a 30(b) 22 on budgets as well, and Brian Nelson will be 23 testifying about that as well. So I think 24 budget issues, there's a specific 30(b) witness 25 for budget and costs associated with that, too.</p>

<p style="text-align: right;">Page 226</p> <p>1 Q. For whom has the ADM Board paid --</p> <p>2 MS. KEARSE: And -- and I -- I</p> <p>3 don't mean -- by budget, I'm just going to say,</p> <p>4 I mean, to the extent there's anything</p> <p>5 conflicting, I think you'll have the</p> <p>6 opportunity to talk to Brian Nelson about the</p> <p>7 specific budgets. I do not want Ms. Johnson</p> <p>8 having to be the 30(b) representative on budget</p> <p>9 issues.</p> <p>10 MS. WINNER: I understand if it has</p> <p>11 a -- if it's a number with a dollar sign in</p> <p>12 front of it, that's for one of your other</p> <p>13 witnesses.</p> <p>14 MS. KEARSE: Well, and the whole</p> <p>15 budget line. What's on the budget decreases,</p> <p>16 increases. All --</p> <p>17 MS. WINNER: Okay.</p> <p>18 MS. KEARSE: Anything budget on</p> <p>19 that is Brian Nelson.</p> <p>20 Q. The ADM Board, who -- whose health</p> <p>21 care and medical care costs does the ADM Board</p> <p>22 pay?</p> <p>23 A. Well, they provide treatment to</p> <p>24 individuals who seek it either on their own or</p> <p>25 at the direction of a judge.</p>	<p style="text-align: right;">Page 228</p> <p>1 Q. You have to be below the poverty</p> <p>2 line or something like that?</p> <p>3 A. Oh, I don't know that we do any</p> <p>4 TANF funding for that. I -- I know that there</p> <p>5 is a real intentional and concentrated effort</p> <p>6 to make sure folks are enrolled in Medicaid, if</p> <p>7 they aren't already, so that reimbursement can</p> <p>8 be sought and so that they are able to get the</p> <p>9 best care they can.</p> <p>10 But I don't -- I don't know that</p> <p>11 there's any -- we don't turn people away if</p> <p>12 they can't pay. And certainly if they have</p> <p>13 private pay, those are accepted by a lot of our</p> <p>14 treatment providers as well.</p> <p>15 Q. So when you say costs, are there</p> <p>16 costs for providing health care and medical</p> <p>17 care for patients suffering from opioid-related</p> <p>18 addiction or disease, as in this second bullet</p> <p>19 point, that are not reimbursed by Medicaid or</p> <p>20 other health insurance?</p> <p>21 A. Oh, yeah. A lot of people aren't</p> <p>22 insured still. I mean, a whole lot. You know,</p> <p>23 there are also lots of children who, if they</p> <p>24 are -- if they're -- we call it Rule 6. If</p> <p>25 they are removed from the home, they certainly</p>
<p style="text-align: right;">Page 227</p> <p>1 Q. And is that independent of the</p> <p>2 treatment that's provided through contracts</p> <p>3 with the likes of Oriana House?</p> <p>4 A. It can be. The -- ADM is a funder,</p> <p>5 so they fund the Oriana House. They fund IBH,</p> <p>6 the Interval Brotherhood Home. They fund the</p> <p>7 Community Health Center. So they're not a</p> <p>8 direct treatment provider, so, you know, the</p> <p>9 dollars they spend aren't on, you know,</p> <p>10 person-to-person care. They're spent --</p> <p>11 Q. For programs.</p> <p>12 A. Yes.</p> <p>13 Q. Who determines the eligibility for</p> <p>14 those programs?</p> <p>15 A. The caseworkers, primarily.</p> <p>16 Probation officers. At times judges. You</p> <p>17 know, if you go to a detox center, you'll be</p> <p>18 interviewed. If you get arrested, you'll be</p> <p>19 interviewed. And the folks who work in our</p> <p>20 probation department and with our drug courts</p> <p>21 have specialized training to make some of those</p> <p>22 referrals and those decisions.</p> <p>23 Q. Are there any financial-need tests</p> <p>24 for any of the programs?</p> <p>25 A. I don't know what you mean by that.</p>	<p style="text-align: right;">Page 229</p> <p>1 have to have a health care screening, and not</p> <p>2 all of those children are enrolled in Medicaid</p> <p>3 and -- and/or have insurance, and so a lot</p> <p>4 of -- a lot of times -- there are plenty of</p> <p>5 folks who don't have insurance and are not</p> <p>6 being reimbursed for.</p> <p>7 And certainly we've got some</p> <p>8 facilities like IBH, which exceeds the Medicaid</p> <p>9 bed limit for reimbursement, and so we can't</p> <p>10 get any reimbursement at IBH, which is our</p> <p>11 largest inpatient facility.</p> <p>12 MS. KEARSE: And, Counsel, I'll</p> <p>13 just -- I mean I know you're asking questions,</p> <p>14 but even Topic 11, that Brian Nelson will -- it</p> <p>15 talks about the source of funds, so I think</p> <p>16 Ms. Johnson could talk, certainly, about the --</p> <p>17 the harm that's been done to the community</p> <p>18 there, but when you're talking about the</p> <p>19 sources of funds and the dollar signs, I think</p> <p>20 it is more appropriate -- it is more</p> <p>21 appropriate for Mr. Nelson, who has been</p> <p>22 designated as a 30(b) for damages and budgets</p> <p>23 and line items that -- that go to the specific</p> <p>24 costs of things as well.</p> <p>25 Q. You said that the public health</p>

<p style="text-align: right;">Page 230</p> <p>1 department also incurs some of the costs that 2 are covered -- that are addressed in this 3 second bullet point. For whom does the public 4 health department pay for health care and 5 medical care?</p> <p>6 A. Well, they -- they are direct 7 treatment providers, so they do some direct -- 8 I call it person to person. They are care 9 providers, some of their programming.</p> <p>10 Q. And do they have any programs that 11 are limited to opioid addiction?</p> <p>12 A. Well, their needle exchange 13 certainly is and their fentanyl strip program, 14 I would say, are opioid -- you know, those are 15 certainly opioid-driven programs.</p> <p>16 Q. Well, needle exchange can -- can 17 apply to addicts using other drugs also, can't 18 it?</p> <p>19 A. Well, sure, but I've not heard of 20 people using intravenous cocaine. I mean, 21 opioids seem to be the ones that go with 22 needles.</p> <p>23 Q. Any other programs that are 24 specific to opioids in the public health 25 department?</p>	<p style="text-align: right;">Page 232</p> <p>1 A. When our residents first -- I 2 shouldn't say first. When it started to become 3 more prevalent that folks were overdosing in 4 homes outside of hospitals, there was not a lot 5 of attention paid to the scene. Medical 6 emergency first and foremost, and -- and that's 7 the way it was treated.</p> <p>8 And then there came a shift of, 9 this needs to be treated like a crime scene, 10 because it is. If someone overdosed then, you 11 know, died with the needle in their arm, the 12 response was typically two-part. It was from 13 EMT to make sure all efforts to resuscitate had 14 been completed, and then the scene was then 15 treated like a crime scene, which had not been 16 previously done before. And as we talked about 17 before, detectives were assigned to respond to 18 those as quickly as possible so that evidence 19 could be preserved and the scene could be 20 evaluated.</p> <p>21 So there was definitely training 22 that went into some of our officers 23 understanding what to look for, what to be 24 careful of, because, quite frankly, as this 25 epidemic has evolved, the danger to our</p>
<p style="text-align: right;">Page 231</p> <p>1 A. Public health department 2 participates in the Centering program. That's 3 at Summa Health System's Barberton campus. 4 They provide some wraparound services there, 5 and that is an opioid-specific treatment 6 program for pregnant moms and moms of babies 7 that -- that the public health department 8 participates in.</p> <p>9 Q. When you say "participates," what 10 do you mean by that?</p> <p>11 A. They offer person-to-person and 12 direct-group counseling services.</p> <p>13 Q. Is there anybody else that the 14 public health department pays health care or 15 medical care for involving opioid-related 16 addiction or disease?</p> <p>17 A. I can't -- I can't think of any 18 others right now.</p> <p>19 Q. All right. Let's go to the next 20 item, which is "Costs of training emergency 21 and/or first responders in the proper treatment 22 of drug overdoses."</p> <p>23 A. Uh-huh.</p> <p>24 Q. What kind of -- what -- can you 25 describe what kind of training that refers to?</p>	<p style="text-align: right;">Page 233</p> <p>1 officers has increased.</p> <p>2 Q. And the danger to the officers is 3 primarily from exposure to fentanyl?</p> <p>4 A. And carfentanil and needles. You 5 know, needle sticks are still troubling, to say 6 the least, and require medical treatment and 7 attention.</p> <p>8 Q. Well, the training that -- that's 9 described in Bullet Point 3, I mean, who 10 receives this training? Police officers?</p> <p>11 A. Police officers, the QRT response 12 teams, the recovery coaches, any folks who 13 might respond to an immediate scene of 14 overdose.</p> <p>15 Q. And how many people have received 16 that kind of training?</p> <p>17 A. Gosh, I don't know the answer to 18 that.</p> <p>19 Q. What kind of training -- I mean, 20 what scope of training? Are we talking about 21 somebody having to go off to a course for a 22 month? Are we talking about a course of a 23 couple hours in an afternoon? Can you sort of 24 give us a sense of --</p> <p>25 A. I know that some of --</p>

<p style="text-align: right;">Page 234</p> <p>1 Q. -- the extent of the training 2 that's required here?</p> <p>3 A. I know some of our law enforcement 4 officers have received more training than, you 5 know, an hour update. I know that there are 6 some law enforcement officers who not only have 7 received it but now give it. They -- they 8 teach other officers how to do it.</p> <p>9 As far as our recovery coaches, 10 there's a certification process, because 11 recovery coaches are dispatched with the QRT 12 teams, and so they certainly have been trained 13 on it. And it's -- it's not an insignificant 14 training process and certification process for 15 those folks. But the number? Not enough. We 16 could use more recovery coaches.</p> <p>17 Q. Well, what's the average amount of 18 time that a police officer has -- the average 19 amount of time that a police officer has in 20 training for this?</p> <p>21 A. I couldn't speak to the average 22 number.</p> <p>23 Q. Are all police officers given this 24 training?</p> <p>25 A. All police officers are trained in</p>	<p style="text-align: right;">Page 236</p> <p>1 training them on how to use naloxone.</p> <p>2 Q. Yeah, let's come back to the 3 naloxone in a minute.</p> <p>4 A. Yeah.</p> <p>5 Q. But -- but my question is, I mean, 6 I would -- I -- maybe I'm wrong, but I would 7 assume that an EMT, among the basic skill set 8 for an EMT would be dealing with an overdose --</p> <p>9 A. Sure.</p> <p>10 Q. -- handling an overdose situation, 11 and that's nothing particularly special now, is 12 it?</p> <p>13 MS. KEARSE: Object to form.</p> <p>14 A. I don't know that I disagree with 15 that. I think the -- the cumulative nature of 16 some of our EMTs responding has required some 17 additional attention paid to their -- to their 18 mental wellness, because when you've got EMTs 19 who respond to the same house five times, it 20 can certainly impact and create some care 21 fatigue. So I -- I know that there has been 22 some intentionality about addressing that with 23 first responders as well.</p> <p>24 MS. WINNER: Why don't we take a 25 break.</p>
<p style="text-align: right;">Page 235</p> <p>1 evidence collection and investigative tools, 2 things like that. Specifically to overdose and 3 more specifically overdose death, I -- I don't 4 want to guess.</p> <p>5 Q. Have we pretty much covered the 6 third bullet point now?</p> <p>7 A. We talked only about police 8 officers. We didn't really talk about the 9 EMTs.</p> <p>10 Q. Okay.</p> <p>11 A. So --</p> <p>12 Q. So is there also training for 13 the --</p> <p>14 A. Sure.</p> <p>15 Q. I mean, I assume EMTs have to be 16 trained to deal with overdoses no matter what, 17 right?</p> <p>18 A. Sure, but --</p> <p>19 MS. KEARSE: Object to form.</p> <p>20 A. -- they also -- they also need to 21 be trained on how to interact with law 22 enforcement in that capacity as well, because 23 it's an emergency situation, but it's also a 24 crime scene. And the other part that we did 25 not talk about with police officers was</p>	<p style="text-align: right;">Page 237</p> <p>1 THE WITNESS: Sure.</p> <p>2 THE VIDEOGRAPHER: Off the record 3 at 2:17.</p> <p>4 (A recess was taken.)</p> <p>5 THE VIDEOGRAPHER: On the record. 6 This is the beginning of Disk No. 3. The time 7 is 2:42.</p> <p>8 BY MS. WINNER:</p> <p>9 Q. Okay. We're back on the record. 10 Do you still have Exhibit 7 in 11 front of you?</p> <p>12 A. Yes.</p> <p>13 Q. And we've been talking about some 14 of the bullet points under Response 18?</p> <p>15 A. Yes.</p> <p>16 Q. And I'm not going to probably skip 17 over some of them, because I -- I think most of 18 them are ones that your counsel would direct 19 all of my questions to one of your colleagues.</p> <p>20 A. Okay.</p> <p>21 Q. But there are a few that I'd like 22 to ask you a few more questions about.</p> <p>23 A. Sure.</p> <p>24 Q. If you would look at the last 25 bullet point on page 15, first of all, "Costs</p>

<p style="text-align: right;">Page 238</p> <p>1 for providing mental health services, 2 treatment, counseling, rehabilitation service, 3 and social service to victim of the opioid 4 epidemic and their families." 5 Now, I think a lot of these 6 categories overlap. 7 A. Yeah. 8 Q. So I think a lot of this one we've 9 already talked about. 10 Is there anything that fits in this 11 category that you haven't already described for 12 me? 13 A. I don't know that we've talked a 14 lot about Children's Services and the costs 15 associated with the increased treatment and 16 placement. 17 Q. We have a whole separate bullet 18 point -- 19 A. Oh, that's right. Sure. Okay. 20 Q. -- for that one later. So let's -- 21 MS. KEARSE: And I'm -- I'm sorry. 22 Which bullet point are you on? 23 MS. WINNER: We're on the last one 24 on page 15. 25 MS. KEARSE: Okay. All right.</p>	<p style="text-align: right;">Page 240</p> <p>1 MS. WINNER: Oops. Okay. 2 MR. JOHNSON: Oh, now they did. 3 MS. WINNER: Now we're back on. 4 MR. JOHNSON: Thank you. 5 A. So this was done in response to a 6 need for not only more treatment beds, but also 7 a variety of treatment options for folks. It 8 really -- it's a large tract of land that the 9 County owns and had for sale that we certainly 10 didn't sell to anyone else because we felt it 11 was so imperative to create this availability 12 of space for -- for these treatment providers. 13 Q. Where is this land located? 14 A. It's located in Lakemore, which is 15 interesting because it's a landlocked community 16 inside of Springfield, which is just east of 17 Akron. 18 Q. You said you had it for sale. How 19 long had it been for sale? 20 A. I don't know when the last -- when 21 it -- the last tenants. So it -- I don't know 22 how long it had been for sale. 23 Q. The -- are these, Hope United and 24 Dan Gregory's group, whatever its name is, 25 limited to opioid addiction treatment?</p>
<p style="text-align: right;">Page 239</p> <p>1 A. So directly from the County, 2 because of the increased demand for inpatient 3 treatment, as well as other forms of services 4 and counseling centers, the County donated 5 land. There are two separate 501(c)(3) groups 6 in Summit County who were working together and 7 are working together. One called Hope United, 8 which is seeking to create a community center 9 specifically for folks recovering from opioid 10 addiction. 11 The other is called -- I've lost 12 it. Dan Gregory's group. It will come to me 13 as I talk about it. They are looking to build 14 an inpatient facility. And they approached the 15 County multiple times looking for land or a 16 building that would make sense. 17 Because we could not find the right 18 fit for something they could purchase, we 19 donated over 20 acres of land to these two 20 501(c)(3)s in an effort to co-locate them and 21 provide, really, a campus for treatment. This 22 was done essentially because we saw the need 23 and -- 24 MR. JOHNSON: They didn't turn the 25 telephone back on.</p>	<p style="text-align: right;">Page 241</p> <p>1 A. I don't think that they are limited 2 to, but they came to us because of. Both of 3 their families are personally affected by the 4 opioid epidemic. 5 Hope United was founded by Travis 6 and Shelly Bornstein, and they lost their son 7 to an overdose. And he was a college athlete 8 who became addicted to opioids, and when no -- 9 he could no longer get those, he turned to 10 heroin. And he overdosed, and his body was 11 dumped in a field. And so they very quickly 12 mobilized their community to support this 13 effort of having a place of hope for people to 14 go to. 15 And Dan's organization, he also has 16 a family member who has been directly impacted 17 by opioid addiction that started with 18 medication and now has turned to heroin. 19 Q. And what is the source of your 20 information about how his addiction started? 21 A. I talked with him. 22 Q. With him? He told you that? 23 A. I talked with Dan, and I talked 24 with Shelly and Travis Bornstein. They lost 25 their son.</p>

Page 242

1 Q. Okay. But my point is, did you --
 2 do you have any information, other than what
 3 these family members told you about that?
 4 A. No. He's dead. I mean, this is
 5 what happened to him.
 6 Q. Well, but, I -- again, you're --
 7 you're a former prosecutor. You know the
 8 difference between hearsay and direct -- direct
 9 evidence.
 10 Do you have any personal knowledge
 11 on that point or is it you just know what they
 12 told you?
 13 MS. KEARSE: Object to form.
 14 A. I believe that the parents knew
 15 what their child was doing when he was taking
 16 prescription medication prescribed to him by
 17 his physician after an injury. And they know
 18 that he then started seeking heroin. And they
 19 know this because he died with a needle in his
 20 arm.
 21 Q. And that's what they've told you;
 22 is that correct?
 23 A. That's also what a police report
 24 indicates in the way that he died.
 25 Q. And does the police report include

Page 243

1 any independent information about the source of
 2 his opioid use?
 3 A. I don't recall exactly what the
 4 police report says.
 5 Q. Okay. On this, have we now covered
 6 either in our conversation just now or in our
 7 conversation before the break, everything
 8 that -- that's covered within -- of the last
 9 bullet point on page 15?
 10 A. That's the best of my ability at
 11 this point, yes.
 12 Q. Okay. Why don't we skip over the
 13 next bullet point and talk about the second
 14 bullet point on page 16.
 15 A. Uh-huh.
 16 Q. Which is costs associated with
 17 various public safety and health initiatives
 18 related to the opioid epidemic. And again, I
 19 don't want us to be repeating ourselves.
 20 A. Sure.
 21 Q. So is there anything in that
 22 category beyond what we've already talked about
 23 here today?
 24 A. The number of dump sites for
 25 medication has increased. I know that most

Page 244

1 police departments in Summit County now have a
 2 drop-off box, and --
 3 Q. Is that what a dump site is --
 4 A. Yeah.
 5 Q. -- a drop-off box?
 6 A. Yes, yes. And there have been
 7 several initiatives, drug take-back days, where
 8 there's specified locations for folks to turn
 9 in unused medications.
 10 Q. Who runs that?
 11 A. It depends. Obviously, all of the
 12 different police departments monitor their own
 13 drop boxes. The DEA certainly has, I think,
 14 either one or two specified days per year, but
 15 local law enforcement groups have done their
 16 own, and it has gone to a point where we've had
 17 local high school groups organize some of these
 18 sort of take-back or turn-in days.
 19 Q. All right. Well, what is --
 20 what -- just focusing in on the county again.
 21 A. Uh-huh.
 22 Q. What -- what has Summit County done
 23 in this category?
 24 A. Well, the health department
 25 participates in those, as well as ADM. Those

Page 245

1 are -- a lot of those initiatives are driven
 2 out of the Opiate Task Force meetings. So the
 3 health department and -- and the ADM are
 4 involved in all of those efforts for those
 5 initiatives.
 6 Q. Well, other than the -- is there
 7 anything else other than the dump sites and the
 8 drug take-back days that fits in this category,
 9 beyond the things that we've already talked
 10 about. I realize some of them would probably
 11 fit --
 12 A. Yeah.
 13 Q. -- into this category also.
 14 A. Did we talk about the fentanyl
 15 strips and needles with this?
 16 Q. You have.
 17 A. Okay.
 18 Q. Anything else?
 19 A. The -- Dr. Smith and Dr. Kohler
 20 presenting at continuing medical education
 21 programs. As far as initiatives, that's --
 22 that's what I can come up with at this point.
 23 Q. Now, the -- the dump sites for
 24 medication and the drug take-back days, those
 25 are not limited to opioids, are they?

<p style="text-align: right;">Page 246</p> <p>1 A. No.</p> <p>2 Q. All right. The costs associated</p> <p>3 with the increased burden on Plaintiff's drug</p> <p>4 courts, are there specific initiatives</p> <p>5 associated with opioids that have been</p> <p>6 undertaken by the drug courts?</p> <p>7 A. They've had to increase capacity.</p> <p>8 As far as initiatives, I guess I don't know</p> <p>9 exactly how to frame that other than to say</p> <p>10 there's been an increase in who becomes</p> <p>11 eligible for drug court, or I -- we call it</p> <p>12 "Hope Court" in municipal court. It's "Turning</p> <p>13 Point" in common pleas court. But I guess it's</p> <p>14 commonly referred to as "drug court."</p> <p>15 But it used to be, 10 and 15 years</p> <p>16 ago even, the only courses that went to drug</p> <p>17 court was drug cases, possession cases, and</p> <p>18 there's been a shift in policy and in thought</p> <p>19 that it should be expanded to cover theft cases</p> <p>20 or other things that were committed as a result</p> <p>21 of addiction and drug-seeking behavior.</p> <p>22 So the expansion of and sort of the</p> <p>23 change in philosophy has certainly required</p> <p>24 additional probation officers, additional</p> <p>25 caseworkers. Common pleas court now has two</p>	<p style="text-align: right;">Page 248</p> <p>1 talk about to incur -- to expand the</p> <p>2 eligibility, that isn't limited to people with</p> <p>3 opioid problems, is it?</p> <p>4 A. No. But I really think it was the</p> <p>5 opioid epidemic that awakened this sort of</p> <p>6 sensibility about rather than criminalizing</p> <p>7 this behavior, looking at the root of why this</p> <p>8 person committed theft or why this person</p> <p>9 committed forgery of this check, rather than</p> <p>10 just, you know, the punishment for writing a</p> <p>11 bad check on, you know, either a closed account</p> <p>12 or someone else's account. And -- and seeing</p> <p>13 that the reason they did it was they were</p> <p>14 trying to get money to buy opioids.</p> <p>15 So I think that that created an</p> <p>16 entire shift in -- in sort of the ideology in</p> <p>17 our community that -- looking at what we call</p> <p>18 crime as part of addiction.</p> <p>19 Q. Well, let me ask you this. If --</p> <p>20 if opioids were to disappear tomorrow so that</p> <p>21 all you had --</p> <p>22 A. Please.</p> <p>23 Q. Yeah. I think we all agree with</p> <p>24 that. At least illegal opioids.</p> <p>25 MS. KEARSE: Objection.</p>
<p style="text-align: right;">Page 247</p> <p>1 judges. It expanded from one of our three</p> <p>2 municipal courts to there's now a second drug</p> <p>3 court. And Barberton Municipal Court and the</p> <p>4 Stow Municipal Court has an agreement with</p> <p>5 Akron so that some of their defendants can use</p> <p>6 the services in Akron.</p> <p>7 Q. Okay. But I want to focus again on</p> <p>8 Summit, what Summit County --</p> <p>9 A. Right, and we --</p> <p>10 Q. -- has incurred here.</p> <p>11 A. -- we -- so the court system is 100</p> <p>12 percent Summit County, the common pleas court</p> <p>13 system.</p> <p>14 Q. Okay. I see.</p> <p>15 A. Yes. So that's general fund money</p> <p>16 for the most part. Some of the grant funds</p> <p>17 that we talked about previously helped support</p> <p>18 drug court, but that -- that is a Summit County</p> <p>19 cost.</p> <p>20 Q. To the extent Summit County --</p> <p>21 okay, Summit County versus another</p> <p>22 jurisdiction. But some of that money may be</p> <p>23 paid with grant funds?</p> <p>24 A. Yes.</p> <p>25 Q. Now, this policy change that you</p>	<p style="text-align: right;">Page 249</p> <p>1 Q. And if the -- if opioids were to --</p> <p>2 the opioid problem was to disappear tomorrow</p> <p>3 and all you had left were cocaine addicts, meth</p> <p>4 addicts, people addicted to other substances, I</p> <p>5 assume you would still -- you know, Summit</p> <p>6 County would still want to have a drug court</p> <p>7 for those people?</p> <p>8 A. Yes. We had a drug court before</p> <p>9 the opioid epidemic.</p> <p>10 Q. And this policy change is something</p> <p>11 you would probably still keep in place?</p> <p>12 A. I would certainly hope so.</p> <p>13 Q. Okay. Costs associated with</p> <p>14 cleanup of public parks, spaces, and facilities</p> <p>15 of needles and other debris and waste of opioid</p> <p>16 addiction. Is this something that's actually</p> <p>17 tracked somehow in the county?</p> <p>18 MS. KEARSE: Object to form.</p> <p>19 A. I would suggest that that be</p> <p>20 referred to Mr. Nelson, that the -- Summit</p> <p>21 County Metroparks is a separate entity. They</p> <p>22 are funded by a levy. So I don't know what</p> <p>23 their tracking on that part is.</p> <p>24 Q. Do you know anything about this</p> <p>25 cost category?</p>

<p style="text-align: right;">Page 250</p> <p>1 A. I do not.</p> <p>2 Q. Loss of tax revenue due to</p> <p>3 decreased efficiency and size of the working</p> <p>4 population in Plaintiff's communities, and due</p> <p>5 to other impacts on property values and other</p> <p>6 tax generators for Plaintiff.</p> <p>7 Has there been any kind of study</p> <p>8 done to evaluate this category of loss?</p> <p>9 A. Not by Summit County. We do have a</p> <p>10 division of workforce development, and we also</p> <p>11 have an economic and community development</p> <p>12 division within the executive's office. And</p> <p>13 part of what we do in that division is make</p> <p>14 house calls, essentially, to the businesses in</p> <p>15 Summit County.</p> <p>16 And the number one complaint or the</p> <p>17 number one need of employers in Summit County</p> <p>18 is workforce. And by and large these are</p> <p>19 manufacturing jobs. And going one step</p> <p>20 further, the number one issue is having folks</p> <p>21 who can pass a drug test, and there's a lot of</p> <p>22 concern from our business community that they</p> <p>23 can't expand because the workforce is not</p> <p>24 healthy enough to do so.</p> <p>25 And, again, as I previously said,</p>	<p style="text-align: right;">Page 252</p> <p>1 Q. And that is generally considered at</p> <p>2 the level of full employment, correct?</p> <p>3 A. I don't know -- I don't know how to</p> <p>4 respond to that.</p> <p>5 Q. Do you -- but 4 percent is a pretty</p> <p>6 low unemployment rate, is it not?</p> <p>7 MS. KEARSE: Object to form.</p> <p>8 A. I think it depends on if you're one</p> <p>9 of the people who's employed and if you're one</p> <p>10 of the people who is looking for a workforce.</p> <p>11 Q. Well, let me ask you this way. If</p> <p>12 you are somebody who is looking for a</p> <p>13 workforce, you typically will have a much more</p> <p>14 difficult time filling positions at 4 percent</p> <p>15 unemployment rate than, say, at 7 or 8 or 10</p> <p>16 percent unemployment rate, correct?</p> <p>17 A. I think it depends on the industry.</p> <p>18 And the unemployment rate doesn't look at our</p> <p>19 underemployment, where we've got folks who</p> <p>20 perhaps were nurses or other professionals that</p> <p>21 are regulated by the State, who now, with a</p> <p>22 felony conviction, can no longer practice in</p> <p>23 the field they were previously, you know,</p> <p>24 paying income tax and owned a home and now work</p> <p>25 at minimum wage jobs or a lower paying wage job</p>
<p style="text-align: right;">Page 251</p> <p>1 there are a lot of industries that are</p> <p>2 regulated, either by statute or ordinance, that</p> <p>3 disallow felons. And with this epidemic</p> <p>4 creating a new class of not only sick people,</p> <p>5 it created a new class of sometimes</p> <p>6 unemployable people in certain fields because</p> <p>7 of their felony classification.</p> <p>8 And again, it's also an issue of</p> <p>9 how can we measure what we didn't know? When</p> <p>10 you couldn't look at a newspaper in 2016</p> <p>11 without seeing a headline about death and</p> <p>12 opioid affliction in the community, it's hard</p> <p>13 to say what we missed when it comes to economic</p> <p>14 development or tax generators, because, A, we</p> <p>15 were busy trying to address the issue, and, B,</p> <p>16 if you were a site selector at that time, I</p> <p>17 can't imagine that Summit County would have</p> <p>18 been a desirable location if you were looking</p> <p>19 to relocate a new manufacturing plant or a</p> <p>20 headquarters of some type of economic</p> <p>21 development industry.</p> <p>22 Q. What's the unemployment rate in</p> <p>23 Summit County right now?</p> <p>24 A. I think it's right around 4</p> <p>25 percent.</p>	<p style="text-align: right;">Page 253</p> <p>1 than previously.</p> <p>2 Q. How many people are in that</p> <p>3 category?</p> <p>4 A. I don't know.</p> <p>5 Q. Are you aware of any specific</p> <p>6 business investments that businesses have</p> <p>7 considered making in Summit County but have not</p> <p>8 made as a result of the opioid crisis?</p> <p>9 A. No. As I said, trying to capture</p> <p>10 what you never knew was happening is -- is</p> <p>11 incredibly difficult, at least for us.</p> <p>12 Q. And Northeast Ohio has had -- been</p> <p>13 struggling with attracting investment for a</p> <p>14 number of years now, hasn't it?</p> <p>15 A. I -- I don't really want to speak</p> <p>16 for Northeast Ohio. I feel like Summit County</p> <p>17 has weathered the financial crisis in some</p> <p>18 better ways than most, but it's because we've</p> <p>19 been -- we operate with a thousand less</p> <p>20 employees than we did 10 years ago, so I</p> <p>21 couldn't say what Northeast Ohio has -- has or</p> <p>22 has not you attracted.</p> <p>23 Q. Well, as the -- was the -- did the</p> <p>24 financial crisis hit Summit County hard?</p> <p>25 A. Yes, it did.</p>

Page 254

1 Q. Is there -- are there any specific
2 tax revenue streams that you can identify for
3 which you believe there is a quantifiable
4 impact?
5 A. I would have to defer to -- to
6 Mr. Nelson that, on the tax revenue streams. I
7 mean, we're a sales-tax-based fund, our -- I
8 would defer to Mr. Nelson that one.
9 Q. So is the answer you don't know?
10 MS. KEARSE: Object to form.
11 A. As I sit here today, I -- I can't
12 answer that question.
13 Q. When it talk -- when you -- when
14 this response talks about tax revenue, is it
15 talking about sales tax revenue?
16 A. I think it includes sales tax --
17 sales tax revenue, but also income tax revenue.
18 When you're not working, you're not paying
19 income tax, and -- and that can impact the
20 County as well. While we don't collect income
21 tax, what affects Akron affects Summit County,
22 and when their numbers are down, we have to
23 find ways to help support our 31 communities.
24 And so when, quote-unquote,
25 business is good for the 31 communities,

Page 255

1 business is also good for Summit County. And
2 likewise, when it's not, the strain and the
3 leveraging of dollars has to become much more
4 creative.
5 Q. So am I correct that Akron charges
6 income tax, but Summit County does not?
7 A. Well, that -- that's our primary --
8 the way our general fund is -- is set up is
9 that we operate -- all counties in Ohio operate
10 on sales tax revenue.
11 Q. Are there any other tax revenues
12 that the County receives that are affected, you
13 believe, by the opioid crisis?
14 A. Sitting here today, I don't -- I
15 don't know that I can come up with any.
16 MS. KEARSE: And for the record, I
17 think she already deferred to Mr. Nelson as
18 well, so if there's anything she's missing,
19 Mr. Nelson can fill that in for you.
20 MS. WINNER: I'm sure Mr. Nelson
21 will be a fount of information.
22 MS. KEARSE: Save some time.
23 MS. WINNER: We will.
24 Q. Okay. Let me then ask -- go down a
25 couple more, toward the next to last bullet on

Page 256

1 the page, talks about cost associated with
2 impact of opioid epidemic on Plaintiff's
3 vehicle fleets.
4 What does that relate to?
5 MS. KEARSE: Object to form.
6 MS. WINNER: Oh, you meant -- you
7 were objecting to my tone of voice.
8 MS. KEARSE: Well, I didn't want to
9 say it that way, but, yeah.
10 MS. WINNER: Yeah, okay. Fair
11 enough.
12 MS. KEARSE: I guess you were
13 responding to how I said "object to form."
14 (Laughter.)
15 MS. KEARSE: We got to have some
16 fun at this.
17 A. So there are multiple fleets of
18 vehicles in the County. Surprising number of
19 vehicles. And as I sit here, the -- the thing
20 that really stands out to me is that, you know,
21 buying new vehicles for our sheriff's
22 department, for the investigators and the
23 prosecutor's office, all the way down to the
24 surveyors for the fiscal office, certainly when
25 the bottom line is impacted, the timeliness of,

Page 257

1 you know, replacement -- I certainly hope it's
2 not repair -- but replacement of these vehicles
3 isn't a priority when we're using our funds
4 elsewhere. Beyond that, I can't speak to that
5 one.
6 Q. Okay. Then go on, the next one is
7 costs for Plaintiff to properly and adequately
8 abate the nuisance created by the opioid
9 epidemic.
10 And, again, excluding everything
11 you've already described, is there anything
12 else that falls into this category?
13 A. This one's hard for me, because
14 there's so much that I cannot, as -- as an
15 attorney and as whatever my hats are, I'm not
16 an economist. These kids who have gone into
17 our Children's Services system, the babies born
18 addicted, the people who this -- this entire
19 population who is now living with addiction.
20 Luckily, we've gotten better at
21 harm reduction, but what that means is that now
22 we have this population of people who are
23 living with addiction who are going to our
24 community health center for methadone every
25 single day. The costs for that, to me, are

<p style="text-align: right;">Page 258</p> <p>1 endless.</p> <p>2 So, I mean, we've -- as I said,</p> <p>3 there's always a dead horse that needs to be</p> <p>4 beaten somewhere, but we have gone over so many</p> <p>5 of these things, but we haven't talked about</p> <p>6 the future. These costs we've been talking</p> <p>7 about in the past tense. These are costs that</p> <p>8 are being incurred today. They are costs --</p> <p>9 these same costs are going to be incurred</p> <p>10 tomorrow. There are still kids coming into CSB</p> <p>11 at higher rates than before.</p> <p>12 And so it's like looking at these</p> <p>13 numbers from the past and putting them out into</p> <p>14 when? I don't know, because the generational</p> <p>15 addiction that's been created by this epidemic</p> <p>16 is something that we've never seen before, and</p> <p>17 so it's hard for me, as an attorney and not an</p> <p>18 economist, to project what we might need for</p> <p>19 these kids and for these families.</p> <p>20 Q. Is that your full answer?</p> <p>21 A. That is.</p> <p>22 Q. All right. Then the last bullet is</p> <p>23 costs for child services and foster care for</p> <p>24 opioid-dependent babies and foster children.</p> <p>25 And you talked a little bit about</p>	<p style="text-align: right;">Page 260</p> <p>1 alarming is that that isn't the case with</p> <p>2 opioids, because it's a familial addiction.</p> <p>3 Mom is addicted. Brother is addicted.</p> <p>4 Grandparent is addicted. And so the ability to</p> <p>5 place a child with a family member has</p> <p>6 decreased. And when the child has to be placed</p> <p>7 with a non-family member, the costs of that</p> <p>8 placement are higher than they are with a</p> <p>9 family member.</p> <p>10 Q. Well, I'm -- one thing that just</p> <p>11 struck me as you were talking just now is you</p> <p>12 talked about familial addiction. When a --</p> <p>13 when you see, you know, mom, dad, grandma, all</p> <p>14 addicted to opioids, did all of them start with</p> <p>15 prescription opioids from a doctor, or does it</p> <p>16 start with one particular family member and</p> <p>17 then it spreads to others?</p> <p>18 A. My experience has shown me that</p> <p>19 when one person comes home with a bottle full</p> <p>20 of 60 or 90 pills and that person either uses</p> <p>21 or doesn't use them all, the readily available</p> <p>22 supply in the home is what leads to this</p> <p>23 familial addiction. Everybody has access to</p> <p>24 this oversupply, and it's right there in front</p> <p>25 of them because there are so many pills.</p>
<p style="text-align: right;">Page 259</p> <p>1 this earlier. I guess my first question is, to</p> <p>2 what extent are the -- the -- are child</p> <p>3 services and foster care services tracked in</p> <p>4 terms of the extent to which they relate</p> <p>5 explicitly to opioid addiction?</p> <p>6 A. I believe in -- in 2016, our</p> <p>7 Children's Services Bureau began tracking,</p> <p>8 like, a specific -- I don't know what they</p> <p>9 would call it, but I would call it, like, the</p> <p>10 entrance point, what brought this kid into our</p> <p>11 system. And I believe it was in 2016, maybe</p> <p>12 later in the year, they began specifically</p> <p>13 identifying those. And I believe Director</p> <p>14 Barnes talked about that, that they had seen an</p> <p>15 increase to the point that it became imperative</p> <p>16 that they focus on it so that they could</p> <p>17 quantify and understand how to budget for it.</p> <p>18 The costs for foster care and</p> <p>19 placement have grown additionally, because with</p> <p>20 the prior forms of addiction that we'd seen in</p> <p>21 Summit County -- crack, methamphetamine,</p> <p>22 cocaine -- familial placement was always</p> <p>23 priority. Can a -- can this child be placed</p> <p>24 with a family member?</p> <p>25 And what has been incredibly</p>	<p style="text-align: right;">Page 261</p> <p>1 Q. If somebody were able to make -- to</p> <p>2 wave a magic wand and make heroin and fentanyl</p> <p>3 disappear, would the opioid epidemic in Summit</p> <p>4 County look different than it does now?</p> <p>5 MS. KEARSE: Object to form. Calls</p> <p>6 for speculation.</p> <p>7 A. I mean, if I had a magic wand, I'd</p> <p>8 go back much farther than that and make sure</p> <p>9 that the doctors and our community was educated</p> <p>10 about the addiction rates and levels and let</p> <p>11 people know, if you get addicted to this, you</p> <p>12 are very likely going to be out in the street</p> <p>13 looking for heroin.</p> <p>14 Q. Okay. But that wasn't my question.</p> <p>15 My question was if heroin wasn't available</p> <p>16 anymore, fentanyl wasn't available anymore,</p> <p>17 what impact, if any, would that have on the</p> <p>18 opioid situation in Summit County?</p> <p>19 A. If it --</p> <p>20 MS. KEARSE: Object to form.</p> <p>21 A. If it wasn't available in Summit</p> <p>22 County and people were addicted to opioids,</p> <p>23 they'd go someplace else to get it. That's</p> <p>24 how -- that's how this addiction is</p> <p>25 functioning. The -- it's not like they're</p>

<p style="text-align: right;">Page 262</p> <p>1 not -- they're going to stay in bed and be 2 like, "Meh, it's not out there, so I'm good." 3 The pill sickness that people get is what 4 drives them out to find that heroin, because 5 the pills were too expensive or harder to get. 6 So, I mean, that magic wand -- 7 heroin's been around. It's not like this is 8 the first time heroin has been in Summit 9 County. But it was not so incredibly prevalent 10 until the space created by the opioid industry 11 brought it upon us. 12 So, yeah, it would change if there 13 wasn't any heroin available or fentanyl 14 available, but I still have this huge addicted 15 population who are going to be sick, who are 16 going to be seeking pills or seeking opium in 17 some fashion. 18 Q. Would you expect overdoses to 19 decline in that situation? 20 A. Well, certainly the overdoses from 21 fentanyl, if it wasn't available, would go 22 away. But I don't -- I don't know that I 23 can -- can speculate to that. 24 Q. Okay. That's fair enough. Let me 25 ask you, actually, a different question that I</p>	<p style="text-align: right;">Page 264</p> <p>1 Ohio's Amended Responses and 2 Objections to the Manufacturer 3 Defendants' First Set of 4 Interrogatories and the National 5 Retail Pharmacy Defendants' First 6 Set of Interrogatories Re: 30(b)(6) 7 Topics, was marked for purposes of 8 identification.) 9 - - - - - 10 (Thereupon, Deposition Exhibit 11, 11 Plaintiffs The City of Cleveland, 12 County of Cuyahoga, County of Summit 13 and City of Akron's Supplemental 14 Amended Responses and 15 Objections to the Manufacturer 16 Defendant's First Set of 17 Interrogatories, Submitted Pursuant 18 to Discovery Ruling No. 13, was 19 marked for purposes of 20 identification.) 21 - - - - - 22 (Thereupon, Deposition Exhibit 12, 23 Spreadsheet Titled "Confidential 24 Protected Health Information - 25 Produced Under a Protective Order -</p>
<p style="text-align: right;">Page 263</p> <p>1 intended to ask you earlier, and I forgot. 2 Has Summit County seen an issue 3 with drug dealers selling counterfeit 4 prescription opioids? 5 A. As far as -- I know that there have 6 been some that were like fentanyl that were 7 being told as -- yes, I'm -- I am aware of 8 that. 9 Q. Has that been a significant 10 problem? 11 A. I mean, any time fentanyl is in the 12 community, if it's less than a milligram, it's 13 a significant problem, because we know how 14 potent it is. 15 MS. WINNER: I think I'm going to 16 turn it over to one of my colleagues, so why 17 don't we go off the record so we can switch 18 places and move our boxes around. 19 THE WITNESS: Sure, okay. 20 THE VIDEOGRAPHER: Off the record 21 at 3:15. 22 (A recess was taken.) 23 - - - - - 24 (Thereupon, Deposition Exhibit 10, 25 Summit County and the City of Akron,</p>	<p style="text-align: right;">Page 265</p> <p>1 Attorneys' Eyes Only, was marked for 2 purposes of identification.) 3 - - - - - 4 (Thereupon, Deposition Exhibit 13, 5 Spreadsheet Titled "Confidential 6 Protected Health Information - 7 Produced Under a Protective Order - 8 Attorneys' Eyes Only, was marked for 9 purposes of identification.) 10 - - - - - 11 (Thereupon, Deposition Exhibit 14, 12 1/8/2019 Letter from Atty Linda 13 Singer to Special Master David Cohen 14 Re: Plaintiffs' Response to 15 Manufacturer Defendants' Renewed 16 Motion to Compel Immediate and Full 17 Compliance with Discovery Ruling 18 Nos. 5 and 13, was marked for 19 purposes of identification.) 20 - - - - - 21 (Thereupon, Deposition Exhibit 15, 22 Spreadsheet Titled "Confidential 23 Protected Health Information - 24 Produced Under a Protective Order - 25 Attorneys' Eyes Only, was marked for</p>

<p style="text-align: right;">Page 266</p> <p>1 purposes of identification.)</p> <p>2 - - - -</p> <p>3 (Thereupon, Deposition Exhibit 16,</p> <p>4 Spreadsheet Titled "Confidential</p> <p>5 Protected Health Information", was</p> <p>6 marked for purposes of</p> <p>7 identification.)</p> <p>8 - - - -</p> <p>9 (Thereupon, Deposition Exhibit 17,</p> <p>10 Document Listing Names and Dates of</p> <p>11 Summit County Overdose Deaths, was</p> <p>12 marked for purposes of</p> <p>13 identification.)</p> <p>14 - - - -</p> <p>15 THE VIDEOGRAPHER: On the record at</p> <p>16 3:38.</p> <p>17 EXAMINATION OF GRETA JOHNSON</p> <p>18 BY MS. FEINSTEIN:</p> <p>19 Q. Good afternoon, Ms. Johnson.</p> <p>20 A. Good afternoon.</p> <p>21 Q. My name is Wendy West Feinstein.</p> <p>22 We met briefly this morning before we went on</p> <p>23 the record. I represent the Teva Defendants.</p> <p>24 I'm going to take over the</p> <p>25 examination now, and a few of my colleagues may</p>	<p style="text-align: right;">Page 268</p> <p>1 Plaintiffs used to identify the information</p> <p>2 required by the interrogatories at issue in</p> <p>3 Discovery Ruling No. 5.</p> <p>4 Q. Do you understand that ruling?</p> <p>5 A. Yes, I do.</p> <p>6 Q. Have you had an opportunity to</p> <p>7 review the Plaintiff's responses pursuant to</p> <p>8 Special Master Cohen's order?</p> <p>9 A. Yes.</p> <p>10 Q. And did you do that in preparation</p> <p>11 for your deposition today?</p> <p>12 A. I -- I didn't do it for week -- the</p> <p>13 weekend.</p> <p>14 Q. You didn't do it for fun.</p> <p>15 A. Yes, yes. I absolutely did, yes.</p> <p>16 Q. Did you speak with anyone, aside</p> <p>17 from counsel, to prepare to testify on these</p> <p>18 topics?</p> <p>19 A. No, I -- not specifically about</p> <p>20 those interrogatories.</p> <p>21 Q. Did you talk with anyone at</p> <p>22 Rawlings about these topics?</p> <p>23 A. No.</p> <p>24 Q. Did you review any documents</p> <p>25 specifically to respond to these top- -- or to</p>
<p style="text-align: right;">Page 267</p> <p>1 have some additional questions after I'm done,</p> <p>2 okay?</p> <p>3 A. Sure.</p> <p>4 Q. You were designated on a number of</p> <p>5 topics, and my colleague, Ms. Winner, went</p> <p>6 through some of those topics with you about</p> <p>7 your designations. Four of the topics that</p> <p>8 were not in the letter, but that were</p> <p>9 confirmed by e-mail, were Topics 4, 5, 6, and</p> <p>10 19.</p> <p>11 A. Yes. I'm familiar with that.</p> <p>12 Q. Are you prepared to testify on</p> <p>13 those topics today?</p> <p>14 A. I am.</p> <p>15 MS. FLOWERS: To be clear, though,</p> <p>16 it's not 4, 5, 6 and 19. It's 4, 5, 6, and 19</p> <p>17 as rewritten by Special Master Cohen.</p> <p>18 MS. FEINSTEIN: Exactly. Yes.</p> <p>19 Thank you, Counsel. And we can read that into</p> <p>20 the record now.</p> <p>21 Special Master Cohen, after some</p> <p>22 back and forth among counsel, revised those</p> <p>23 topics and directed that with respect to Topics</p> <p>24 4, 5, 6, and 19, Plaintiffs must designate a</p> <p>25 person to testify on the criteria that</p>	<p style="text-align: right;">Page 269</p> <p>1 be prepared to testify about these topics?</p> <p>2 A. Other than the interrogatories and</p> <p>3 the responses? Outside of that, just</p> <p>4 discussion with counsel.</p> <p>5 Q. Did you review Special Master</p> <p>6 Cohen's order?</p> <p>7 A. I've seen it, yes.</p> <p>8 Q. And it's attached to Exhibit 1,</p> <p>9 right?</p> <p>10 A. Yes, yes.</p> <p>11 Q. Okay, good. During the break, your</p> <p>12 counsel and everyone here was very patient as I</p> <p>13 handed you a series of documents, and I'd like</p> <p>14 to go through those right now.</p> <p>15 The -- the first document that we</p> <p>16 marked as an exhibit and that I put in front of</p> <p>17 you should be Exhibit 10, which is Summit</p> <p>18 County and the City of Akron, Ohio's Amended</p> <p>19 Responses and Objections to the Manufacturer</p> <p>20 Defendants' First Set of Interrogatories and</p> <p>21 the National Retail Pharmacy Defendants' First</p> <p>22 Set of Interrogatories.</p> <p>23 Do you have that in front of you as</p> <p>24 Exhibit 10?</p> <p>25 A. I do have that in front of me, yes.</p>

<p style="text-align: right;">Page 270</p> <p>1 Q. And it is dated, if you flip to --</p> <p>2 the pages are not numbered, but it's page 8,</p> <p>3 the second to last page. This is a double</p> <p>4 sided copy.</p> <p>5 A. Yes.</p> <p>6 Q. November 2, 2018?</p> <p>7 A. Yes.</p> <p>8 Q. Excellent.</p> <p>9 The next document that I've handed</p> <p>10 to you and that we have marked as Exhibit 11 is</p> <p>11 the Plaintiff -- Plaintiffs -- the City of</p> <p>12 Cleveland, County of Cuyahoga, County of</p> <p>13 Summit, and City of Akron's Supplemental</p> <p>14 Amended Responses and Objections to the</p> <p>15 Manufacturer Defendants' First Set of</p> <p>16 Interrogatories Submitted Pursuant to Discovery</p> <p>17 Ruling 13.</p> <p>18 Do you have that in front of you as</p> <p>19 Exhibit 11?</p> <p>20 A. I do.</p> <p>21 Q. And that document, if you turn</p> <p>22 to -- the third to the last page is dated</p> <p>23 December -- it's actually page 15. We've got</p> <p>24 page numbers on this copy. It's dated December</p> <p>25 31, 2018.</p>	<p style="text-align: right;">Page 272</p> <p>1 what information is to be contained in those</p> <p>2 spreadsheets?</p> <p>3 A. Well, I understand that the request</p> <p>4 was made to try to identify individuals, and I</p> <p>5 know that the County's contention has always</p> <p>6 been that this is not about any individual</p> <p>7 prescription or any individual person or case</p> <p>8 of overdose, that it -- it is truly an</p> <p>9 aggregate of all of the harms.</p> <p>10 So I guess as an attorney, I was</p> <p>11 intrigued by this -- by this process, but I</p> <p>12 know that we provided, through Rawlings GS,</p> <p>13 some of this information in conjunction with</p> <p>14 the information that counsel received from</p> <p>15 ARCOS.</p> <p>16 Q. Okay. And it's -- it's your</p> <p>17 understanding that the ARCOS data was used to</p> <p>18 respond to these interrogatories, or Rawlings</p> <p>19 data?</p> <p>20 A. Well, Rawlings, yes.</p> <p>21 Q. Okay. Let's look next at</p> <p>22 Exhibit 11, which is the Plaintiff's response</p> <p>23 to -- revised response to Interrogatory No. 6.</p> <p>24 If I could direct your attention to</p> <p>25 the bottom of the first page of Exhibit 11, it</p>
<p style="text-align: right;">Page 271</p> <p>1 A. Yes.</p> <p>2 Q. Is that what you have in front of</p> <p>3 you?</p> <p>4 A. Yes.</p> <p>5 Q. Excellent.</p> <p>6 Is it your understanding that</p> <p>7 pursuant to Exhibit 11, so the responses</p> <p>8 provided -- oh, I'm sorry -- pursuant to the</p> <p>9 responses provided in Exhibit 10, that</p> <p>10 spreadsheets were provided to counsel for the</p> <p>11 Defendants?</p> <p>12 MS. FLOWERS: Object to the form.</p> <p>13 A. I know that counsel was requested</p> <p>14 to provide, I believe it was 500 different</p> <p>15 instances, so I assumed they would be in a --</p> <p>16 in a spreadsheet.</p> <p>17 Q. Have you seen the spreadsheets</p> <p>18 before today?</p> <p>19 A. I have not.</p> <p>20 Q. Okay. At no point in your</p> <p>21 preparation did you review the spreadsheets,</p> <p>22 whether electronically or in print form?</p> <p>23 A. I did not review this -- the actual</p> <p>24 spreadsheets.</p> <p>25 Q. Do you have an understanding of</p>	<p style="text-align: right;">Page 273</p> <p>1 repeats the interrogatory there and requests</p> <p>2 the Plaintiffs to identify and describe 500</p> <p>3 prescriptions of opioids that were written in</p> <p>4 Summit County in reliance on any alleged</p> <p>5 misrepresentations, omissions, or any alleged</p> <p>6 wrongdoing by any Defendant, correct?</p> <p>7 A. Correct.</p> <p>8 Q. To identify those 500</p> <p>9 prescriptions, Summit County provided to us the</p> <p>10 spreadsheets that we have marked as Exhibit 12</p> <p>11 and Exhibit 13. Do you have those in front of</p> <p>12 you?</p> <p>13 A. I do.</p> <p>14 Q. Okay. And, again, just to</p> <p>15 reiterate, you have not seen Exhibit 12 or 13</p> <p>16 earlier?</p> <p>17 A. No.</p> <p>18 Q. Before today?</p> <p>19 A. Correct. I think I've -- I think</p> <p>20 I've seen them, that my counsel's had them. I</p> <p>21 have not reviewed them.</p> <p>22 Q. Okay. But you've reviewed the</p> <p>23 written responses that we see in Exhibit 11,</p> <p>24 right?</p> <p>25 A. Yes, yes.</p>

<p style="text-align: right;">Page 274</p> <p>1 Q. If I could direct your attention, 2 please, to page 14 of the written responses? 3 A. In -- in Exhibit 11? 4 Q. Yes. 5 A. Yes, okay. 6 Q. Directing your attention to the 7 last paragraph on page 14 about, it looks like 8 maybe one sentence in, it says, "Bellwether 9 Plaintiffs." Do you see where I am? 10 A. I do. 11 Q. "Bellwether Plaintiffs contend that 12 each prescription in the previously provided 13 Exhibit A was as a result of Manufacturer 14 Defendants' deceptive marketing." 15 Did I read that correctly? 16 A. You did. 17 Q. Is that your understanding of what 18 is represented in Exhibits 12 and 13? 19 MS. FLOWERS: Objection. I think 20 this goes beyond the redefinition by the 21 Special Master, and -- that she testify on the 22 criteria used to answer these interrogatories. 23 MS. FEINSTEIN: Thank you, Counsel. 24 I'm just setting a foundation and identifying 25 the exhibit so that we have some basis to -- to</p>	<p style="text-align: right;">Page 276</p> <p>1 discovery process, and then the contract with 2 Rawlings to get the additional information as 3 requested by counsel. 4 Q. Is it your understanding that 5 Rawlings obtained that information from 6 CareSource and Medical Mutual of Ohio? 7 A. I know that they have access to 8 insurance forms and to pharmacy claims that I 9 didn't know anybody had that source. So, yes, 10 I -- I became aware of that through preparation 11 for this. 12 Q. And am I correct in identifying 13 those two entities as the entities from which 14 Rawlings got information to provide to the 15 Plaintiffs to provide to the Defendants in this 16 case? 17 A. I don't -- I don't know that. I 18 can't confirm that. I don't have any 19 independent knowledge of that. 20 Q. You didn't review that information 21 to prepare to testify on these topics for 22 today? 23 A. I did not review -- 24 MS. FLOWERS: Object to form. 25 A. I did not review the Rawlings,</p>
<p style="text-align: right;">Page 275</p> <p>1 ask about the criteria -- 2 MS. FLOWERS: Okay. 3 MS. FEINSTEIN: -- in those 4 exhibits, okay? 5 A. I -- having not reviewed 12 and 13, 6 and seeing that they are double sided and what 7 appears to be a couple hundred pages, I don't 8 know what's in these. 9 Q. Okay. 10 A. So I -- they look like what would 11 go with a request like that. I see 12 "manufacturer," "provider name," "patient key 13 name," so I see identifying factors. Makes 14 sense, but I couldn't -- I couldn't swear to 15 that. 16 Q. What is your understanding of where 17 the Plaintiffs obtained that information to 18 provide it to the Defendants in response to 19 this interrogatory? 20 A. The criterion we used or the -- 21 Q. First the source. From where did 22 you -- did the Plaintiffs obtain that 23 information to provide it to the Defendants? 24 A. My understanding is that some of 25 the information started with our original</p>	<p style="text-align: right;">Page 277</p> <p>1 their cri- -- their -- how they went about 2 doing their job. 3 Q. Are you aware that the Plaintiffs 4 subpoenaed Rawlings to obtain information to 5 respond to these interrogatories? 6 A. Yes. 7 Q. What is your understanding of why 8 the Plaintiffs subpoenaed Rawlings to get that 9 information for the Plain- -- for the 10 Defendants? 11 A. My understanding -- and, again, I 12 know that -- that there was a reluctance or -- 13 we didn't want this to come down to 14 individuals. So my understanding is that 15 Rawlings was contacted because they have the 16 ability to mine that data, that would take -- I 17 can't even imagine if an individual could do 18 that on their own, if they had that access. 19 But apparently Rawlings has the access to those 20 records to provide what's contained in these 21 spreadsheets to defense counsel. 22 Q. And Plaintiffs did not have that 23 information themselves, right? 24 A. No. Oh, no. No, no. 25 Q. Do you know what CareSource is?</p>

<p style="text-align: right;">Page 278</p> <p>1 A. It's an insurance carrier of some 2 sort. I think they do -- Caremark -- I don't 3 know if Caremark and CareSource are the same 4 thing, but typically prescription coverage. 5 Q. Does CareSource provide coverage to 6 Summit County? 7 A. I believe -- I don't know if I 8 filled a prescription for myself, so that's a 9 healthy year. 10 I believe they are. That sounds 11 familiar. I -- yeah, I believe they are. 12 Q. Do you know what Medical Mutual of 13 Ohio is? 14 A. Yes. That's an insurance provider. 15 Q. And does Medical Mutual of Ohio 16 provide insurance to Summit County? 17 A. I know that one. Yes. 18 Q. I'll represent to you that it's my 19 understanding, based on the information that we 20 received from counsel, that the exhibits that I 21 placed in front of you as -- marked as Exhibits 22 12 and 13 were identified by Plaintiffs' 23 counsel collectively, for all of the Track One 24 Plaintiffs, as the Exhibit A response for 25 Interrogatory No. 6.</p>	<p style="text-align: right;">Page 280</p> <p>1 specific conversation with counsel. 2 Q. If I could direct your attention to 3 one of the letters that I sent to you, or that 4 I marked for you, Exhibit 14, please. 5 Do you have Exhibit 14 in front of 6 you? 7 A. I do. 8 MS. KEARSE: What was 14? 9 THE WITNESS: It's a letter -- 10 MS. FEINSTEIN: Should be the 11 letter from Linda Singer. 12 MS. KEARSE: Did I already eat it? 13 MS. FEINSTEIN: Sorry, guys, I 14 tried to make this organized. 15 Q. Do you have that in front of you? 16 A. I do. 17 Q. Have you seen Exhibit 14 before 18 today? 19 A. I believe I have seen -- oh, yes, 20 I've seen this list. 21 Q. And what page are you referring to? 22 A. I'm sorry. Page 2 stands out as -- 23 I recognize that page. 24 Q. Okay. 25 A. That -- the -- all the rest.</p>
<p style="text-align: right;">Page 279</p> <p>1 A. Okay. 2 Q. Is it your understanding, sitting 3 here today to testify about the criteria used 4 to identify prescriptions, that Plaintiffs 5 identified a number of prescriptions in an -- 6 in an Exhibit A that was provided to defense 7 counsel? 8 A. I understand that I -- I lost you 9 for a minute there. I understand that we -- 10 that criterion was established to obtain a 11 certain type or kind of record. 12 Q. Do you have an understanding that 13 Defendants received an initial Exhibit A with 14 500 prescriptions on it, using certain 15 criteria, and then just recently, on Friday, 16 received a second Exhibit A with different 17 criteria? 18 MS. KEARSE: Object to form. 19 MS. FLOWERS: Object to form. 20 A. I -- I am not aware of that. 21 Q. So you're not aware of an updated 22 spreadsheet that we received from Plaintiffs on 23 Friday of last week? 24 MS. FLOWERS: The same objection. 25 A. I -- I don't recall having that</p>	<p style="text-align: right;">Page 281</p> <p>1 Q. This letter is dated January 8, 2 2019. It's addressed to Special Master David 3 Cohen. 4 Do you know who Special Master 5 David Cohen is? 6 A. I know that he is -- I'm going to 7 use the term probably incorrectly, but a 8 magistrate or some -- some sort of official 9 within this case. I've -- I've seen his name 10 and heard him referred to multiple times. 11 Q. Did you review this letter in 12 preparation for your testimony today? 13 A. I believe we discussed this just 14 last week. 15 Q. Is it your understanding that this 16 letter was sent to Special Master Cohen, but 17 then copied to all defense counsel in the case? 18 MS. FLOWERS: Objection. 19 A. I don't know how to answer that. 20 Q. Do you understand this letter to be 21 providing additional information related to the 22 interrogatory responses that the Plaintiffs 23 provided to the Defendants, specifically 24 Interrogatories No. 6, 7, and 10? 25 MS. FLOWERS: Objection. Beyond</p>

<p style="text-align: right;">Page 282</p> <p>1 the scope.</p> <p>2 A. Could you ask that question again,</p> <p>3 please?</p> <p>4 Q. Sure.</p> <p>5 A. Sorry. I'm just trying to</p> <p>6 familiarize myself with the document.</p> <p>7 Q. Sure. Do you understand this</p> <p>8 letter to be a -- further information from the</p> <p>9 Plaintiffs to the Defendants in response to</p> <p>10 Interrogatories Nos. 6, 7, and 10, which are</p> <p>11 the topics that you've been designated on,</p> <p>12 Deposition Topics 4, 5, 6, and 19, as modified</p> <p>13 by Special Master Cohen?</p> <p>14 A. That's -- yeah, that's -- yes,</p> <p>15 that's what the -- I -- I hesitate to answer</p> <p>16 that, because I still don't think I understand</p> <p>17 what -- what you're asking me, what it does,</p> <p>18 and I --</p> <p>19 Q. Did you -- do you understand this</p> <p>20 letter to be providing additional information</p> <p>21 in response to those interrogatories?</p> <p>22 A. Yes.</p> <p>23 MS. FLOWERS: Object to form.</p> <p>24 Q. Okay. If I could direct your</p> <p>25 attention to page 4 of Exhibit 14, Section 2.</p>	<p style="text-align: right;">Page 284</p> <p>1 before, is it your understanding that those are</p> <p>2 lists of the exhibits that Plaintiff -- the</p> <p>3 prescriptions that Plaintiffs identified as</p> <p>4 described in Ms. Singer's letter?</p> <p>5 A. So you're saying this was Exhibit A</p> <p>6 to --</p> <p>7 Q. Those two documents, yes.</p> <p>8 A. Again, from looking at just the</p> <p>9 front page, that's what it appears to be. But</p> <p>10 having not reviewed Exhibits 12 and 13 before,</p> <p>11 I couldn't definitively say. But I have no</p> <p>12 reason to doubt that.</p> <p>13 Q. The criteria that we just read in</p> <p>14 Exhibit 14 in Ms. Singer's letter, do you have</p> <p>15 any understanding of whether those were the</p> <p>16 criteria used to identify the 500 prescriptions</p> <p>17 in response to the interrogatories?</p> <p>18 A. I do. The -- the criterion we</p> <p>19 discussed was folks who were not diagnosed with</p> <p>20 cancer, folks who were receiving over 120 MME</p> <p>21 prescriptions, and folks who had been diagnosed</p> <p>22 with a -- a chemical dependency previously, or</p> <p>23 an -- so the -- that touches on two of them in</p> <p>24 a little bit of a different vein.</p> <p>25 Q. Do you know whether there was an</p>
<p style="text-align: right;">Page 283</p> <p>1 A. Okay.</p> <p>2 Q. Section 2 on page 4 is about</p> <p>3 halfway down the page, is titled, "Plaintiffs</p> <p>4 have completely responded to Interrogatories</p> <p>5 Nos. 6, 7, and 10."</p> <p>6 Do you see that?</p> <p>7 A. I do.</p> <p>8 Q. About halfway down that page, right</p> <p>9 after the parenthetical reference, there's a</p> <p>10 sentence that begins with "Exhibit A." Do you</p> <p>11 see that?</p> <p>12 A. I do.</p> <p>13 Q. It reads, "Exhibit A is a</p> <p>14 spreadsheet that identifies 500 patients by</p> <p>15 name in the relevant jurisdictions who have not</p> <p>16 been treated for cancer, who have been</p> <p>17 diagnosed with opioid use disorder, and who</p> <p>18 were provided daily doses of opioids of 150 MME</p> <p>19 or higher."</p> <p>20 Did I read that correctly?</p> <p>21 A. You did.</p> <p>22 Q. Is it your understanding that the</p> <p>23 exhibits, the spreadsheets that I provided you,</p> <p>24 12 and 13, understanding that you haven't seen</p> <p>25 the printed versions or electronic versions</p>	<p style="text-align: right;">Page 285</p> <p>1 initial -- strike that.</p> <p>2 So if you continue down in Exhibit</p> <p>3 14, the sentence we just read identified a</p> <p>4 threshold dosing of 150 MME --</p> <p>5 A. Right.</p> <p>6 Q. -- right?</p> <p>7 A. Correct.</p> <p>8 Q. Did -- are you aware of the</p> <p>9 Plaintiffs identifying an initial list --</p> <p>10 A. Yes.</p> <p>11 Q. -- of prescriptions, of 500</p> <p>12 prescriptions with a threshold of 150 MME?</p> <p>13 A. So the original list was produced</p> <p>14 at 150, and then the supplemental list was 120?</p> <p>15 Q. Right.</p> <p>16 A. Is that what you're asking me?</p> <p>17 Q. I'm -- I'm asking -- well, I was</p> <p>18 asking first whether you understood where there</p> <p>19 was an initial list of 500 prescriptions --</p> <p>20 A. That's what it says, yes.</p> <p>21 Q. -- is that, as the corporate</p> <p>22 designee for Summit County on this topic, is</p> <p>23 that your understanding of what the original</p> <p>24 500 prescriptions, the threshold dosing was?</p> <p>25 MS. KEARSE: Object to form.</p>

<p style="text-align: right;">Page 286</p> <p>1 A. I'm just going to rely on my 2 preparation in that my understanding was that 3 we had set the criterion to be non-cancer 4 patients, 120 ME -- MME, and folks who suffered 5 already from addiction diagnoses. 6 The -- the 150 is something that I 7 am not familiar with. 8 Q. Okay. So as a part of your 9 preparation, you weren't making 10 any distinguish -- you didn't make any 11 distinction between the initial produced list 12 of 500 prescriptions versus the later produced 13 list of 730 prescriptions at 120 MME; is that 14 right? 15 A. No. My -- my preparation has been 16 focused on the aggregate. My preparation has 17 never been about any individual prescription 18 and what it was for, to whom it was prescribed, 19 or even, frankly, who prescribed it. So I 20 prepared to respond to the request of defense 21 counsel by understanding the criterion and how 22 we went about getting that information from 23 Rawlings. 24 I feel like I have seen this 25 document, because this list looks familiar to</p>	<p style="text-align: right;">Page 288</p> <p>1 Ms. Singer's January 8, 2019 letter, in the 2 last paragraph on page 4 of Exhibit 14, reads, 3 "Nonetheless, in an effort to compromise and to 4 meet Defendants' concerns, Plaintiffs will 5 produce, this week, a revised spreadsheet 6 identifying approximately 730 additional 7 patients who were prescribed daily doses of 8 opioids of 120 MME or higher." 9 Do you see that? 10 A. I do. 11 Q. Does that -- reading those -- those 12 two sentences together -- 13 A. Yes. 14 Q. -- does that help refresh your 15 recollection -- 16 A. Yes. 17 Q. -- or does it inform you -- 18 A. Yes. 19 Q. -- of the course of events? 20 A. I understand where we are now. 21 Q. Okay. And sorry for the confusion. 22 A. No, that's fine. 23 Q. This is a bit of a slog -- 24 A. Right, right. 25 Q. -- so why don't we kind of rewind a</p>
<p style="text-align: right;">Page 287</p> <p>1 me, but I have not -- I would not say I have 2 memorized it or -- 3 Q. Sure. Under- -- 4 A. -- done a deep dive. 5 Q. Understood. Well, let me direct 6 you to the -- still on page 4, the last 7 paragraph on that page, and see if that helps 8 refresh your recollection of -- of what 9 transpired. So we just read, in the first full 10 paragraph under Section 2, in which Ms. Singer 11 writes, "Plaintiffs have completely responded 12 to Interrogatories Nos. 6, 7, and 10," and 13 then -- and I'll paraphrase, because we've 14 already read it into the record -- and 15 provided, in an Exhibit A, 500 prescriptions 16 with the criteria of they have not been treated 17 for cancer, have been diagnosed with opioid use 18 disorder, and who were prescribed daily doses 19 of 150 MME or higher, right? 20 A. Sure, yes. 21 Q. That's what this says? 22 A. Absolutely. 23 Q. Okay. Continuing down -- 24 A. Yes. 25 Q. -- the last paragraph of</p>	<p style="text-align: right;">Page 289</p> <p>1 bit -- 2 A. Sure. 3 Q. -- and just so we've got kind of a 4 clean record of -- of what Summit County's 5 testimony is on this point. 6 A. Absolutely. 7 Q. Okay. So is it Summit County's 8 position that the initial Exhibit A that was 9 produced in response to the Defendant -- 10 Manufacturer Defendants' interrogatories 11 identified 500 prescriptions using criteria 12 that the Plaintiffs had not -- the patients, 13 rather, had not been treated for cancer, have 14 been diagnosed with opioid use disorder, and 15 were prescribed daily doses of opioids of 150 16 MME or higher? 17 A. Correct. 18 Q. More recently -- 19 A. Yes. 20 Q. -- the Plaintiffs identified an 21 additional 730 prescriptions using criter- -- 22 strike that. 23 Using at least -- a new dosing 24 criteria? 25 A. Yes.</p>

<p style="text-align: right;">Page 290</p> <p>1 Q. A lower dosing --</p> <p>2 A. A lower --</p> <p>3 Q. -- criteria --</p> <p>4 A. Yes.</p> <p>5 Q. -- of 120 MME?</p> <p>6 A. Correct. And I believe that lower</p> <p>7 dosing criteria was in accordance with the</p> <p>8 CDC's warning that use at that level and</p> <p>9 anything over 90 MME had a greater chance for</p> <p>10 addiction and misuse.</p> <p>11 Q. So that dosing criteria of 120 MME</p> <p>12 came from the CDC?</p> <p>13 A. Yes. I believe the CDC's</p> <p>14 statements on it are anything over 90 is sort</p> <p>15 of what I would call a danger zone, certainly.</p> <p>16 Q. And just to kind of close the loop</p> <p>17 on these documents that I've placed in front of</p> <p>18 you, if you could please take a look at</p> <p>19 Exhibits 15 and 16 --</p> <p>20 A. Yeah.</p> <p>21 Q. -- which are the other -- the</p> <p>22 additional spreadsheets.</p> <p>23 A. Sure.</p> <p>24 Q. Have you seen either Exhibits 15 or</p> <p>25 16 before today?</p>	<p style="text-align: right;">Page 292</p> <p>1 did the Plaintiffs get those parameters?</p> <p>2 A. Well, again, I think our contention</p> <p>3 has always been and will continue to be that it</p> <p>4 is not about any one individual prescription or</p> <p>5 any two or any 500, but really the aggregate</p> <p>6 effect.</p> <p>7 After consultation with the</p> <p>8 attorneys, I've learned that this was what the</p> <p>9 experts suggested to properly respond to the</p> <p>10 order, these were the appropriate criterion to</p> <p>11 do.</p> <p>12 Q. Is it your understanding that for</p> <p>13 the prescriptions identified in the</p> <p>14 spreadsheets that were Exhibits A to the</p> <p>15 interrogatories, and that we've marked as</p> <p>16 separate deposition exhibits here today, that</p> <p>17 all three of those criteria had to have been</p> <p>18 met for the prescription to be included in the</p> <p>19 list?</p> <p>20 A. That was my understanding.</p> <p>21 Q. Are there any prescriptions listed</p> <p>22 in the Exhibit A that do not meet the -- those</p> <p>23 criteria?</p> <p>24 A. I have not reviewed Exhibit A, so I</p> <p>25 could not speak to that.</p>
<p style="text-align: right;">Page 291</p> <p>1 A. I have not.</p> <p>2 Q. And I'll represent to you for the</p> <p>3 record that these are the prescriptions that we</p> <p>4 received on Friday, January 19 -- or January</p> <p>5 11, 2019, for the revised Exhibit A response --</p> <p>6 A. Okay.</p> <p>7 Q. -- at 120 MME.</p> <p>8 A. Okay.</p> <p>9 Q. Okay. The source of the data, it's</p> <p>10 my understanding, continue to be Rawlings?</p> <p>11 A. Yes.</p> <p>12 Q. And also was CareSource and Medical</p> <p>13 Mutual of Ohio data. Is that your</p> <p>14 understanding as well?</p> <p>15 A. That's my understanding.</p> <p>16 Q. We can set those spreadsheets</p> <p>17 aside, but I -- if you need to refer to them at</p> <p>18 any point --</p> <p>19 A. Okay.</p> <p>20 Q. -- please feel free.</p> <p>21 A. Okay.</p> <p>22 Q. So what -- the -- the letter from</p> <p>23 Ms. Singer that we just looked at, Exhibit 14,</p> <p>24 that had the three sort of parameters for the</p> <p>25 identification of the prescriptions, from where</p>	<p style="text-align: right;">Page 293</p> <p>1 Q. Did you receive any information, as</p> <p>2 a part of your preparation to testify on the</p> <p>3 criteria today, that when the analysis was</p> <p>4 done, that some of the prescriptions that were</p> <p>5 provided to the Defendants did not meet all</p> <p>6 three of those criteria?</p> <p>7 A. I don't have that -- I have not</p> <p>8 received any of that type of information.</p> <p>9 Q. So it's your understanding, and</p> <p>10 just to make sure that we're all on the same</p> <p>11 page, that all of the prescriptions identified</p> <p>12 in Plaintiff's Exhibit A to the Manufacturer</p> <p>13 Defendants' interrogatories, meet the three</p> <p>14 criteria of no cancer diagnosis, 120 MME for</p> <p>15 the most recent list, and diagnosis of opioid</p> <p>16 use disorder; is that right?</p> <p>17 A. Again, I -- I just hesitate to</p> <p>18 confirm what's in here without having reviewed</p> <p>19 it, but if that's what was requested by</p> <p>20 Rawlings and this is the report given by them,</p> <p>21 I would assume that it -- that that is</p> <p>22 accurate.</p> <p>23 Q. You're designated today to talk</p> <p>24 about the criteria that were used by</p> <p>25 Plaintiffs, right?</p>

<p style="text-align: right;">Page 294</p> <p>1 A. Uh-huh, correct.</p> <p>2 Q. Are you aware of any prescriptions</p> <p>3 that have been identified by the Plaintiffs to</p> <p>4 the Defendants in this case that utilize any</p> <p>5 other criteria?</p> <p>6 A. Not that I'm aware of.</p> <p>7 Q. Are you aware of any prescriptions</p> <p>8 that have been identified that do not meet</p> <p>9 those three criteria that we've just listed?</p> <p>10 A. In these documents that you've</p> <p>11 marked, 12, 13, 15, and 16, I am not aware that</p> <p>12 any of those would exist in there.</p> <p>13 Q. Do you know why the initial</p> <p>14 identification of 500 exhibit used a threshold</p> <p>15 dosing of 150 MME?</p> <p>16 A. Well, I know that the CDC, again,</p> <p>17 has said over 90, so I -- I can assume that we</p> <p>18 would be looking at above 90 to start with. I</p> <p>19 don't have direct knowledge of why it was</p> <p>20 lowered to 120, other than to better comport</p> <p>21 with the directives of the Special Master on</p> <p>22 that.</p> <p>23 Q. Do you know why it was started at</p> <p>24 150?</p> <p>25 A. I don't.</p>	<p style="text-align: right;">Page 296</p> <p>1 lowered it to 120?</p> <p>2 A. I do not.</p> <p>3 Q. And you don't know who within</p> <p>4 Summit County, other than potentially</p> <p>5 Dr. Smith, who would have that information?</p> <p>6 MS. FLOWERS: Objection. Asked and</p> <p>7 answered.</p> <p>8 A. I -- Dr. Smith is the medical</p> <p>9 doctor who I think would be in the best</p> <p>10 position to answer that. Perhaps Donna Skoda,</p> <p>11 her -- as the director of Summit County Public</p> <p>12 Health, would have some insight into the</p> <p>13 difference between why 150 and 120 would be so</p> <p>14 important.</p> <p>15 Q. Did -- did you see in your</p> <p>16 preparation any documents from the Plaintiffs</p> <p>17 to Rawlings identifying the criteria that the</p> <p>18 Plaintiffs wanted to apply to the collection of</p> <p>19 data from Rawlings?</p> <p>20 A. No. We -- we talked about the</p> <p>21 subpoena for it, and -- and because I -- I did</p> <p>22 not know what Rawlings was and I had lots of</p> <p>23 question about how that happened, and we -- we</p> <p>24 talked about the subpoena being served than --</p> <p>25 than -- I think that it had contained the</p>
<p style="text-align: right;">Page 295</p> <p>1 Q. Do you know who at Summit County</p> <p>2 who might have that information?</p> <p>3 A. Perhaps Dr. Doug Smith would be the</p> <p>4 person to speak to about the risks that are</p> <p>5 posed by opioids with an MME that high.</p> <p>6 Frankly, I thought they stopped at 120. I did</p> <p>7 not realize it could go up to 150. So I -- I'm</p> <p>8 not sure, other than I know, again, the</p> <p>9 preparation was looking at what the CDC had</p> <p>10 discussed.</p> <p>11 Q. Did you talk with Dr. Smith at all</p> <p>12 in preparation --</p> <p>13 A. I read his --</p> <p>14 Q. -- to testify on those topics?</p> <p>15 A. I did not. I read his deposition.</p> <p>16 Q. Okay. But for purposes of your</p> <p>17 testimony on Topics 4, 5, 6, and 19 of the</p> <p>18 30(b)(6) notice, you did not have any</p> <p>19 discussions with Dr. Smith?</p> <p>20 A. I did not.</p> <p>21 Q. And other than what you've just</p> <p>22 told me about your understanding of the CDC</p> <p>23 guidelines, you don't have any information</p> <p>24 about how Plaintiffs identified the criteria,</p> <p>25 first for a 150 MME threshold, and then later</p>	<p style="text-align: right;">Page 297</p> <p>1 criterion, but I do not believe I have reviewed</p> <p>2 the actual document.</p> <p>3 Q. Did you review the subpoena?</p> <p>4 A. No, I don't believe I reviewed the</p> <p>5 subpoena.</p> <p>6 Q. Did you see any documents that</p> <p>7 related to the criteria utilized by the</p> <p>8 Plaintiffs to identify the prescriptions?</p> <p>9 A. There was an internally created</p> <p>10 document where I -- we talked about what was --</p> <p>11 what the criterion was. It was all during</p> <p>12 preparation with counsel, so it would -- it was</p> <p>13 a document that was created by -- by counsel</p> <p>14 for me to review.</p> <p>15 Q. A document created for purposes of</p> <p>16 preparing you to testify as the corporate</p> <p>17 designee on this topic?</p> <p>18 A. Yes.</p> <p>19 Q. Do you have that document with you</p> <p>20 today?</p> <p>21 A. I -- I don't have the document with</p> <p>22 me.</p> <p>23 MS. KEARSE: And, Counsel, it was</p> <p>24 in consultation for her testimony in this case,</p> <p>25 which would be privileged information. We've</p>

<p style="text-align: right;">Page 298</p> <p>1 provided coun- -- we've provided you with a 2 witness, a 30(b) witness to talk about the 3 criteria. Our work product and anything we've 4 shared is our work product, and it's privileged 5 information. 6 MS. FEINSTEIN: Yeah. And, 7 Counsel, we can visit -- 8 MS. KEARSE: That's fine. 9 MS. FEINSTEIN: -- on this topic at 10 a later date, but I disagree that if it was 11 something that -- that the 30(b)(6) witness 12 reviewed and relied upon for purposes of her 13 corporate designee testimony, I think that we 14 are entitled to see it. But we can discuss 15 that some other time. 16 MS. KEARSE: And, Counsel, I 17 believe, as her -- as her attorney, we're 18 allowed to have conversations and have work 19 product information that would be privileged 20 information for -- in consultation for her 21 preparation today. 22 MS. FEINSTEIN: Yeah, and -- we'll 23 discuss at another time, but, thank you. Your 24 objection is noted. I appreciate that. 25 BY MS. FEINSTEIN:</p>	<p style="text-align: right;">Page 300</p> <p>1 Q. So in preparation regarding the 2 criteria utilized by Plaintiffs, you reviewed 3 Exhibit 10, Exhibit 11, and Exhibit 14? 4 MS. FLOWERS: Object to the form. 5 Lack of foundation. 6 A. I reviewed 10 and 11. I feel like 7 I -- I don't know how you differentiate between 8 looked at and reviewed. I -- this -- Exhibit 9 14 is familiar to me because I recognize seeing 10 this list. I -- I would not say that I 11 reviewed it in depth. 12 Q. And the explanations that we just 13 reviewed on page 4 of Exhibit 14, you had not 14 seen those before today? 15 MS. FLOWERS: Objection. 16 A. I believe I've seen this document. 17 I don't -- I couldn't say that I read them with 18 any explicit detail, but it is familiar to me. 19 Q. Let's talk about the -- the 20 criteria a bit more. The prescriptions that 21 are listed by the Plaintiffs in the Exhibit A 22 include the criteria "not treated for cancer," 23 right? 24 A. So you're back -- you're referring 25 back to 12 and 13?</p>
<p style="text-align: right;">Page 299</p> <p>1 Q. Did you review any other documents, 2 other than the -- the document that your 3 counsel has asserted a work product privilege 4 about, to develop an understanding of the 5 criteria used by Plaintiffs to identify the 6 prescriptions? 7 MS. FLOWERS: Object to the form. 8 Lack of foundation. 9 A. I -- there were some -- and I don't 10 know if they were objections or 11 interrogatories, but there was a pleading that 12 I reviewed that I feel like that's where I -- 13 there was a pleading that I reviewed. I -- I 14 can't recall which one it was, but I remember 15 attaching my notes to the front of it to -- to 16 keep it front of mind. 17 Q. Was it either Exhibit 10 or 11? 18 It's right there, I think, flipped over. 19 A. I think that's right, because I 20 remember seeing the doctors' names at the 21 bottom of the page. So 10 would have been 22 included. Yes, I believe 10 and 11 were in 23 that packet, as well as the -- as this letter 24 from Attorney Singer, were things that sort of 25 had grouped together.</p>	<p style="text-align: right;">Page 301</p> <p>1 Q. The prescriptions that were 2 identified, so I don't want to get bogged down 3 on -- on the documents if you haven't -- if 4 you're not comfortable with the documents. But 5 you're here to testify about the criteria -- 6 A. Yes. 7 Q. -- used by the Plaintiffs -- 8 A. Yes. 9 Q. -- to identify prescriptions, 10 right? 11 A. Correct. 12 Q. So one of those criteria is whether 13 the patients had -- did not have -- were not 14 treated for cancer; is that right? 15 A. That's correct. 16 Q. What criteria did Plaintiffs use to 17 determine whether a patient had been treated 18 with cancer -- or had not been treated for 19 cancer? 20 MS. FLOWERS: Objection. Calls for 21 speculation. 22 A. That's information that I am of the 23 understanding that Rawlings had the access to. 24 I'm not sure how else that would have been 25 obtained other than through this third-party</p>

<p style="text-align: right;">Page 302</p> <p>1 data mine.</p> <p>2 Q. Did Plaintiffs provide to Rawlings</p> <p>3 any information for it to make the</p> <p>4 determination that the prescriptions provided</p> <p>5 identified patients who had not been treated</p> <p>6 for cancer?</p> <p>7 MS. FLOWERS: Objection.</p> <p>8 A. Did -- could you say that again?</p> <p>9 Q. Did Plaintiffs provide to Rawlings</p> <p>10 any information for it, Rawlings, to make the</p> <p>11 determination that the prescriptions provided</p> <p>12 identified patients who had not been treated</p> <p>13 for cancer?</p> <p>14 A. That was one of the criterion we</p> <p>15 asked Rawlings to use. I don't -- I feel like</p> <p>16 I'm still not understanding what you're asking</p> <p>17 me.</p> <p>18 Q. What sources of information were</p> <p>19 used to confirm that the patients had not been</p> <p>20 treated for cancer?</p> <p>21 A. By Rawlings? I -- I don't know</p> <p>22 what Rawlings' methodology was.</p> <p>23 Q. What did Plaintiffs tell Rawlings</p> <p>24 that Plaintiffs needed?</p> <p>25 A. My understanding --</p>	<p style="text-align: right;">Page 304</p> <p>1 Q. Does Summit contend that all of --</p> <p>2 all opioid prescriptions for patients who are</p> <p>3 not treated for cancer are unauthorized,</p> <p>4 medically unnecessary, ineffective, or harmful?</p> <p>5 MS. FLOWERS: Object to the form.</p> <p>6 A. I'm sorry. My brain is going a</p> <p>7 little slow today. Could you repeat that?</p> <p>8 Q. Sure. Does Summit County contend</p> <p>9 that all opioid prescriptions for patients who</p> <p>10 are not treated for cancer are unauthorized,</p> <p>11 medically unnecessary, ineffective, or harmful?</p> <p>12 A. No.</p> <p>13 MS. FLOWERS: Object to the form.</p> <p>14 A. Not all.</p> <p>15 Q. Is --</p> <p>16 A. You don't -- I guess, if I can say</p> <p>17 it this way. We don't contend that every</p> <p>18 person who doesn't have cancer who gets an</p> <p>19 opioid prescription, it's -- that it's</p> <p>20 improper, for lack of a better term.</p> <p>21 Q. Fair enough. Does Summit County</p> <p>22 contend that any opioid prescription for</p> <p>23 conditions other than cancer were written as a</p> <p>24 result of any wrongdoing by the Defendants?</p> <p>25 MS. FLOWERS: Object to the form.</p>
<p style="text-align: right;">Page 303</p> <p>1 MS. FLOWERS: Object to the form.</p> <p>2 A. My understanding is that we</p> <p>3 requested prescriptions for those three things</p> <p>4 we've discussed: folks who did not have</p> <p>5 cancer, folks with a dependency, and over 120</p> <p>6 MME.</p> <p>7 Q. And you don't have any information</p> <p>8 about how Rawlings then determined whether or</p> <p>9 not the patients or the prescriptions</p> <p>10 identified had no cancer treatment?</p> <p>11 A. I -- I do not know how Rawlings'</p> <p>12 data mine works internally.</p> <p>13 Q. And you don't know what sources of</p> <p>14 information Rawlings used to confirm that the</p> <p>15 prescriptions had no treatment for cancer?</p> <p>16 A. Other than what we've referred to</p> <p>17 between Medical Mutual and CareSource, which I</p> <p>18 assume there are claims and documentation</p> <p>19 available through those two entities.</p> <p>20 Q. Do you know whether Rawlings had</p> <p>21 access to underlying information to confirm</p> <p>22 that the -- the prescriptions were not for the</p> <p>23 treatment of cancer?</p> <p>24 A. I do not know what information</p> <p>25 Rawlings had.</p>	<p style="text-align: right;">Page 305</p> <p>1 A. Well, certainly doctors who wrote</p> <p>2 prescriptions for opioids for chronic pain who</p> <p>3 did not have the accurate and appropriate</p> <p>4 information about levels of addiction and</p> <p>5 potential for diversion, potential for misuse,</p> <p>6 while the person in front of them certainly may</p> <p>7 have had pain, Summit County contends that --</p> <p>8 that those doctors did not have the right</p> <p>9 information. And so had they had the right</p> <p>10 information, there could have been another</p> <p>11 result for that patient.</p> <p>12 Q. Does Summit County contend that the</p> <p>13 prescriptions it identified in the Exhibit A to</p> <p>14 the interrogatory were unauthorized, medically</p> <p>15 unnecessary, ineffective, or harmful?</p> <p>16 MS. FLOWERS: Object to the form.</p> <p>17 A. These documents were produced in</p> <p>18 response to the directives of the Special</p> <p>19 Master to comply with individual prescriptions,</p> <p>20 which, again, has never been the contention of</p> <p>21 the County. The contention of the County has</p> <p>22 always been that the aggregate harm caused by</p> <p>23 these, and others, created a supply in our</p> <p>24 community that resulted in this epidemic.</p> <p>25 So --</p>

<p style="text-align: right;">Page 306</p> <p>1 Q. In identifying those criteria, did 2 the Special Ma- -- is it your understanding 3 that the Special Master required the Plaintiffs 4 to apply the criteria that the patients had not 5 been treated for cancer? 6 MS. FLOWERS: Object to the form. 7 A. I don't know the answer to that 8 one. 9 Q. Do you have any understanding of 10 why Plaintiffs applied that criteria to this 11 list? 12 A. Because that's what opioids were 13 originally used for. They were for cancer 14 treatment. They were for acute pain from 15 surgical procedures. 16 It wasn't until this change in 17 methodology and until pain becoming the fifth 18 vital sign and this sort of messaging from 19 manufacturers that -- that opioids were an 20 effective and safe way to treat chronic pain, 21 that this really became a problem. 22 So identifying patients who did not 23 have cancer seemed like a reasonable place to 24 start, since that was the original use of -- of 25 these medications.</p>	<p style="text-align: right;">Page 308</p> <p>1 Q. Is it Summit's contention that any 2 opioid prescription with a daily dose of 120 3 MME or higher was inappropriate? 4 A. Of any prescription? 5 Q. Yes, any opioid prescription with a 6 daily dose of 120 MME or higher was 7 inappropriate? 8 A. No. Certainly there are 9 end-of-life care and cancer care or even, I'm 10 sure, under hospital supervision, folks who've 11 just come out of procedures that that would be 12 appropriate. 13 Q. Does Summit contend that the 14 prescriptions identified in the Exhibit A as 15 being prescriptions of 120 MME per day or 16 higher were written as a result of manufacturer 17 marketing? 18 A. They were written -- I certainly 19 think it played a role or could have played a 20 role in any number of the prescriptions. 21 Q. What sources of information did the 22 Plaintiff use to identify whether any of the 23 prescriptions identified in exhibit -- in the 24 Exhibit A that were provided to Defendants were 25 the result of manufacturer marketing?</p>
<p style="text-align: right;">Page 307</p> <p>1 Q. The criteria of 120 MME that's 2 applied to the later list, you testified 3 earlier that the Plaintiffs identified that 4 number after consulting the CDC guidelines, 5 right? 6 A. Correct. 7 Q. And it's your understanding that 8 the CDC guidelines are 90 per day? 9 A. Well, the CDC guidelines indicated 10 that doses of over 90 are, I think I called it 11 the danger zone. That's what it reads to me, 12 in that that is where there exist a much higher 13 likelihood for addiction and misuse is over 90. 14 Q. How did Plaintiffs land on 120, 15 then, as the threshold dosing amount to 16 identify the prescriptions? 17 A. Well, it's my understanding that -- 18 and just what I've seen, they come in 30, 60, 19 90, 120. So over 90, the next natural dosing 20 would be 120. 21 Q. And you don't have any 22 understanding of why initially 150 was chosen 23 and later 120 was applied? 24 A. I do not. 25 MS. FLOWERS: Objection.</p>	<p style="text-align: right;">Page 309</p> <p>1 MS. FLOWERS: Object to the form. 2 A. Did we -- I don't -- could you ask 3 that again, please? 4 Q. Sure. So I asked you whether it 5 was Summit's contention that manufacturer 6 marketing could play a role -- 7 A. Yes. 8 Q. -- in prescriptions above 120 MME 9 per day, right? 10 A. Sure, uh-huh. 11 Q. And you said that it could for 12 some? 13 A. Sure. 14 Q. And my question, then, is with 15 respect to the prescriptions that have been 16 identified for the Plaintiffs for purposes of 17 responding to the interrogatories, did 18 Plaintiffs use any source of information to 19 determine whether the prescriptions they've 20 listed were, in fact, the result of 21 manufacturer marketing? 22 A. Well, I'm certain that they could 23 in some instances. I know that we are aware of 24 calls being made to doctors by representatives 25 in the community, and certainly even after</p>

<p style="text-align: right;">Page 310</p> <p>1 there was suspected improper prescriptions 2 going on, calls were still being made by 3 manufacturers to some of the doctors in the 4 area, so, again I -- I have not looked at these 5 individuals, but I'm -- I'm certain that 6 information could be extrapolated in some way. 7 Q. Did Summit reach out to any of the 8 prescribers identified for these prescriptions 9 to ask the doctors whether or not manufacturer 10 marketing played a role in their decision to 11 prescribe? 12 A. I know that, through counsel, 13 there's been discussions with doctors about 14 prescribing practices and industry norms at the 15 time, but as -- as a county entity, we did not 16 reach out and ask about these patients. 17 The County engaged in ways to try 18 and educate doctors, certainly the doctors 19 who -- I mean, I see -- I see Harper on here, 20 on the first page, so certainly the County, 21 through law enforcement, intervened in that 22 practice. 23 Q. Is it -- strike that. 24 Is it your understanding that the 25 prescriptions identified in response to the</p>	<p style="text-align: right;">Page 312</p> <p>1 to understand from you, whether those two 2 criteria, either together or either one, it's 3 Plaintiff's position that the prescriptions 4 meeting those criteria were written as a result 5 of manufacturer marketing? 6 A. I'm with you now. 7 Summit County contends that it 8 certainly played a role, that the marketing and 9 the inaccurate information that was provided 10 certainly let doctors and their patients 11 believe that these types of dosing for 12 non-cancer treatment was safe when, you know, 13 certainly it was not at the time. 14 Q. Is Summit County able to identify 15 any specific prescriptions of those it obtained 16 from Rawlings that were the result of 17 manufacturer marketing? 18 MS. FLOWERS: Objection. 19 A. Specifically, no, I can't point to 20 one of these and say this person received it 21 because of marketing. But certainly, again, it 22 can be extrapolated that some calls were being 23 made by reps from certain manufacturers to some 24 of the doctors on this list. 25 MS. FEINSTEIN: All right. Why</p>
<p style="text-align: right;">Page 311</p> <p>1 interrogatory include prescriptions that were 2 written as a result of manufacturer marketing? 3 A. I -- is that -- is that different 4 than what you asked me before? I'm sorry. 5 Q. So you're here to talk to us about 6 the criteria used to identify, and I'm trying 7 to understand what criteria -- 8 A. Yeah, I'm sorry. I'm trying really 9 hard to follow your questions. I really am. 10 MS. KEARSE: Maybe -- maybe we can 11 take a break, too, at some point. I know it's 12 just getting late in the afternoon. 13 MS. FEINSTEIN: Sure, sure, yeah. 14 Q. Let me just try to -- I'll try to 15 rephrase it, okay? And see if we can get on 16 the same page. 17 So we've talked about the not 18 treated for cancer -- 19 A. Right. 20 Q. -- criteria being used, right? 21 And we've talked about the daily 22 dosing of 120 MME -- 23 A. Correct. 24 Q. -- right? 25 And so I was asking, and I'm trying</p>	<p style="text-align: right;">Page 313</p> <p>1 don't we take a break here. 2 THE WITNESS: Okay. 3 THE VIDEOGRAPHER: Off the record 4 at 4:29. 5 (A recess was taken.) 6 THE VIDEOGRAPHER: On the record at 7 5:05. 8 BY MS. FEINSTEIN: 9 Q. Thank you. Ms. Johnson, before the 10 break we were going through the criteria used 11 to identify the prescriptions in response to 12 the Manufacturer Defendants' interrogatories, 13 and -- and I'd like to return to that topic -- 14 A. Great. 15 Q. -- to continue that discussion. 16 The -- Summit County is not 17 contending that anything above 120 MME is 18 improper as a matter of that dosing level, 19 right? 20 A. Not in every circumstance. 21 Q. Exactly. 22 A. Correct. 23 Q. So there could be some 24 circumstances -- 25 A. Absolutely.</p>

<p style="text-align: right;">Page 314</p> <p>1 Q. -- where it would be appropriate; 2 is that right? 3 A. Of course. 4 Q. But there are other circumstances 5 in which Summit County maintains that it may 6 not be appropriate; is that correct? 7 A. That's correct. 8 Q. Does Summit County contend that 9 anything above 150 MME is improper? 10 A. Not in and of itself, as a 11 stand-alone. 12 Q. Combined with other criteria, it 13 potentially could be; is that right? 14 A. Correct. 15 Q. If I could please direct your 16 attention to Exhibit 11. We were looking at 17 Exhibit 11 a little bit before the break. 18 A. Uh-huh. 19 Q. This is the -- the document that 20 includes the Plaintiffs' responses to 21 Interrogatory No. 6, correct? 22 A. Yes. 23 Q. If I could direct your attention, 24 please, to page 15 of Exhibit 11. 25 A. Okay.</p>	<p style="text-align: right;">Page 316</p> <p>1 Q. Do you have any information about 2 what criteria were used to identify those 3 prescriptions of reformulated products listed 4 in Exhibit 11? 5 A. The same criterion that we 6 submitted, the 120, the opioid -- or the 7 dependency and non-cancer patient. 8 Q. Was an additional criteria applied 9 to those reformulated products in that 10 Plaintiffs maintain that they were not 11 abuse-deterrent? 12 A. The three criterion remained the 13 same. It's my understanding that all of these 14 were produced in response to those three 15 crit- -- three criterion that we have talked 16 about at length. 17 Q. There were no additional criteria 18 applied for these reformulated products? 19 A. Not that I'm aware of. 20 Q. And in nothing that you reviewed in 21 preparation for your testimony on these topics 22 led you to believe there were different 23 criteria used for those products? 24 A. Nothing. 25 Q. Directing your attention now to the</p>
<p style="text-align: right;">Page 315</p> <p>1 Q. The first full paragraph on page 15 2 indicates that the list of prescriptions 3 provided by the Plaintiffs includes individuals 4 who are prescribed reformulated OxyContin, 5 Hysingla ER, Opana ER, Exalgo, and Xartemis 6 XR -- and I probably mangled the 7 pronunciations -- as abuse-deterrent 8 formulations of Defendants' opioids. 9 Do you see that? 10 A. I do see that. 11 Q. Is it your understanding that the 12 list of prescriptions included those -- 13 prescriptions for those products? 14 A. The list of prescriptions -- say 15 that last part again. 16 Q. Is it your understanding that the 17 list of prescriptions identified by the 18 Plaintiffs in response to the interrogatories 19 included prescription of those reformulated 20 products that are listed in Exhibit 11? 21 A. That's what the letter states, that 22 it in- -- that this list includes those. 23 Q. Do you have any reason to believe 24 otherwise? 25 A. No.</p>	<p style="text-align: right;">Page 317</p> <p>1 next paragraph now on page 15 of Exhibit 11. 2 The letter reads that "The prescriptions for 3 Actiq, Fentora, and Subsys included in the list 4 of prescriptions, Exhibit A, were prescribed to 5 individuals who did not have a recent diagnosis 6 for cancer." 7 Do you see that? 8 A. I do. 9 Q. Did I read that correctly? 10 A. Yes. 11 Q. What criteria did Plaintiffs use to 12 determine whether a patient had a recent 13 diagnosis of cancer? 14 A. I don't know what Rawlings used as 15 their criterion. I know that the criterion we 16 gave to them were the three that we continue to 17 talk about. 18 Q. And so for the criteria for the -- 19 the Actiq, Fentora, and Subsys prescriptions 20 identified in the list, Plaintiffs told 21 Rawlings to pull those prescriptions or include 22 those prescriptions for which the prescription 23 did not -- the recipient of the prescription 24 did not have a recent diagnosis of cancer; is 25 that right?</p>

<p style="text-align: right;">Page 318</p> <p>1 A. I --</p> <p>2 MS. FLOWERS: Object to the form.</p> <p>3 A. Yeah, I'm not going to use the word</p> <p>4 "recent." I -- I -- the criterion that we gave</p> <p>5 to Rawlings did not have the word "recent" that</p> <p>6 I am aware of.</p> <p>7 Q. The letter, Exhibit 11, includes</p> <p>8 that word, right?</p> <p>9 A. The letter does include that word.</p> <p>10 Q. So do you know whether the criteria</p> <p>11 provided to Rawlings included any time</p> <p>12 parameters for the -- the not-for-cancer</p> <p>13 prescription?</p> <p>14 A. That would have been a decision by</p> <p>15 counsel and the experts. I don't have that</p> <p>16 information.</p> <p>17 Q. And as the designee on the</p> <p>18 criteria, you don't have any information about</p> <p>19 whether there was some time window within which</p> <p>20 a patient had to have been free of a -- a</p> <p>21 diagnosis of cancer?</p> <p>22 MS. FLOWERS: Object to the form.</p> <p>23 Q. Is that right?</p> <p>24 A. That's right.</p> <p>25 Q. Do you know whether Rawlings had</p>	<p style="text-align: right;">Page 320</p> <p>1 identify the prescriptions on this list?</p> <p>2 A. No. The three criteria were based</p> <p>3 on the public health consensus that these were</p> <p>4 a combination of factors that would result in</p> <p>5 improper use of prescription.</p> <p>6 Q. Did Summit consider any other</p> <p>7 criteria in providing its list to the -- to the</p> <p>8 Defendants?</p> <p>9 MS. FLOWERS: Object to the form.</p> <p>10 A. I do not know the conversation</p> <p>11 between the attorneys and Rawlings.</p> <p>12 Q. Did Summit evaluate whether the</p> <p>13 prescriptions were dis -- where the</p> <p>14 prescriptions were dispensed? Was that a</p> <p>15 factor that was considered?</p> <p>16 A. Say that again. Did Summit --</p> <p>17 Q. Did Summit consider where the</p> <p>18 prescriptions were dispensed as a criteria?</p> <p>19 For example, whether they were dispensed in an</p> <p>20 inpatient facility --</p> <p>21 A. Oh, I see --</p> <p>22 Q. -- or at a -- or at a pharmacy?</p> <p>23 A. I see what you're saying.</p> <p>24 I don't know. I don't know the</p> <p>25 answer to that question.</p>
<p style="text-align: right;">Page 319</p> <p>1 available to it any source information, patient</p> <p>2 files or anything such as that, to confirm that</p> <p>3 there was no recent diagnosis of cancer?</p> <p>4 A. I do not know what Rawlings used to</p> <p>5 produce these reports other than their</p> <p>6 contracts with the insurance agencies we've</p> <p>7 discussed.</p> <p>8 Q. And it's your understanding that</p> <p>9 the Plaintiffs, through counsel, provided the</p> <p>10 three criteria to Rawlings to apply?</p> <p>11 A. Yes.</p> <p>12 Q. To generate the list of</p> <p>13 prescriptions?</p> <p>14 A. Yes.</p> <p>15 Q. No other criteria were applied?</p> <p>16 A. None that I'm aware of.</p> <p>17 Q. Did you, in reviewing your</p> <p>18 information to prepare to testify on those</p> <p>19 criteria -- today is my day to ask you about</p> <p>20 that and today is the day for Defendants to</p> <p>21 understand what criteria were applied to</p> <p>22 generate these lists --</p> <p>23 A. Uh-huh.</p> <p>24 Q. -- did anything in the materials</p> <p>25 that you reviewed include any other criteria to</p>	<p style="text-align: right;">Page 321</p> <p>1 Q. Do you know whether -- strike that.</p> <p>2 Did Summit consider whether -- in</p> <p>3 evaluating the dosing parameters, whether the</p> <p>4 dosing was a stable dosing or whether it was a</p> <p>5 tapered dosing?</p> <p>6 MS. FLOWERS: Objection. Asked and</p> <p>7 answered. Calls for speculation.</p> <p>8 A. We looked at the CDC statement on</p> <p>9 90 milligrams being sort of the threshold where</p> <p>10 folks move into more likelihood for dependence</p> <p>11 and addiction.</p> <p>12 Q. So Summit didn't look at the</p> <p>13 prescription, for example, of 120 and compare</p> <p>14 it to any earlier prescription to determine</p> <p>15 whether that patient was being held stable at</p> <p>16 that or whether they were coming down from 150;</p> <p>17 is that right?</p> <p>18 MS. FLOWERS: Object to the form.</p> <p>19 A. We didn't look at any one person.</p> <p>20 We looked at the fact that we had 39 million</p> <p>21 pills in 2012 and said, "This is a crisis."</p> <p>22 There wasn't any one person or</p> <p>23 prescription that we identified as, "This is</p> <p>24 the reason for the case." It's every single</p> <p>25 person in the 500 and in the 720, plus the</p>

Page 322

1 thousands of people who died that brought us to
 2 the conclusion that this needed to happen.
 3 It was the request of defense
 4 counsel, is my understanding, that data be
 5 produced. The criterion was determined,
 6 general health consensus, and beyond that,
 7 those decisions were made by counsel and the
 8 experts they've employed.
 9 Q. And -- and today you are here to
 10 testify about those criteria, and what I'm
 11 trying to understand is how those criteria were
 12 applied by Plaintiffs in identifying the
 13 prescriptions?
 14 MS. KEARSE: And, Counsel, I'll say
 15 she -- the witness has given you the criteria.
 16 So you -- you keep asking her about the
 17 criteria, and Ms. Johnson has testified about
 18 the criteria used. So if you want to ask -- I
 19 mean, at some point you're going to be asking
 20 the same question for another hour, but -- and
 21 I don't know if that's appropriate or not, but
 22 we'll see how it goes.
 23 MS. FEINSTEIN: Thank you, Counsel.
 24 Q. What I'm trying to understand is
 25 how those criteria, then, are applied. And my

Page 323

1 question was --
 2 MS. KEARSE: But -- but the witness
 3 is here to testify about the criteria, and
 4 she's given you the criteria, and I think that
 5 is the scope of her testimony on that.
 6 Q. My question was, in applying those
 7 criteria, did Summit County look at whether the
 8 dosing number was a stable dosing number for
 9 any individual identified in the list?
 10 A. I -- I do not know the answer to
 11 that.
 12 Q. Did Rawlings providing -- strike
 13 that.
 14 Did the Plaintiffs provide to the
 15 Defendants all of the information that Rawlings
 16 provided to it with respect to the
 17 prescriptions identified?
 18 MS. KEARSE: Counsel, I think we're
 19 going beyond the scope when we read -- it's the
 20 criteria that Plaintiffs used to identify the
 21 information that we provided in the
 22 interrogatories. So we're talking about the
 23 information that was provided.
 24 MS. FEINSTEIN: And my question is,
 25 did Rawlings provide any other information.

Page 324

1 The witness testified that Plaintiffs provided
 2 certain criteria to generate a list of
 3 prescriptions. Is the list of prescriptions
 4 that was provided to the Defendants everything
 5 that Rawlings provided in response to those
 6 criteria?
 7 MS. KEARSE: But, Counsel, I'm
 8 saying that is outside the scope that -- she's
 9 testified on what was provided to Defendants
 10 from the answers to the interrogatories, not
 11 what else is -- I don't even know if there's
 12 anything else out there, but I'm just saying
 13 that's not -- I don't think -- I think that's
 14 beyond the scope of what she is to testify
 15 about as to what was provided.
 16 MS. FEINSTEIN: Counsel, your scope
 17 objection is noted, and I'd like an answer to
 18 my question from the witness, please.
 19 A. I don't know if Rawlings provided
 20 anything else. My assumption is that --
 21 MS. KEARSE: I think -- I'm going
 22 to advise, counsel not to assume anything. If
 23 you -- we're not guessing.
 24 Q. The source of information from
 25 Rawlings were in insurance companies,

Page 325

1 CareSource and Medical Mutual of Ohio, right?
 2 A. That's my understanding.
 3 Q. Do you know whether the
 4 prescriptions identified in the materials
 5 provided by Plaintiffs were reimbursed?
 6 MS. KEARSE: Objection. Outside
 7 the scope.
 8 Q. Were they covered by insurance?
 9 A. Oh, I don't know the answer to
 10 that.
 11 Q. Do you know whether Medical Mutual
 12 of Ohio or CareSource rejected payment for any
 13 of the prescriptions identified in the exhibit?
 14 MS. KEARSE: Objection. Outside of
 15 the scope.
 16 A. I -- is that information included
 17 in here? Can it be gleaned from here? I mean,
 18 I can look, but I don't know, as I sit here
 19 today, if that information was a part of that.
 20 Q. Do you know whether, in applying
 21 the criteria, whether Rawlings utilized any
 22 information provided by Plaintiffs, or did
 23 Rawlings use its own data?
 24 MS. KEARSE: Objection. Outside
 25 the scope.

<p style="text-align: right;">Page 326</p> <p>1 A. I do not know Rawlings'</p> <p>2 methodology. All I know is the criterion were</p> <p>3 provided to Rawlings to create these</p> <p>4 spreadsheets at the order of the Court.</p> <p>5 Q. Did Rawlings have any input in</p> <p>6 determining the criteria?</p> <p>7 MS. KEARSE: Object. Outside the</p> <p>8 scope.</p> <p>9 A. No, that -- those decisions were</p> <p>10 made because it -- that's the public health</p> <p>11 consensus, and with counsel and the experts</p> <p>12 from the case made that determination.</p> <p>13 Q. Turning back to Exhibit 11, which</p> <p>14 is the Plaintiffs' response to Interrogatory</p> <p>15 No. 6, if you could please turn to page 5.</p> <p>16 The second full paragraph, it</p> <p>17 reads, "Subject to and without waiving the</p> <p>18 foregoing objections and limitations,</p> <p>19 Bellwether Plaintiffs contend that all</p> <p>20 prescriptions of opioids for chronic pain in</p> <p>21 the bellwether jurisdictions were written in</p> <p>22 reliance on misrepresentations, omissions, and</p> <p>23 wrongdoing alleged in their Complaint."</p> <p>24 Did I read that correctly?</p> <p>25 A. You did.</p>	<p style="text-align: right;">Page 328</p> <p>1 reviewed these documents very specifically, I</p> <p>2 don't know if there is any diagnosis included.</p> <p>3 I can't imagine that there would be.</p> <p>4 So these are folks who have not</p> <p>5 been diagnosed with cancer. Beyond that, I</p> <p>6 mean, quite frankly, even to a layperson,</p> <p>7 someone who has been diagnosed with opioid</p> <p>8 dependency perhaps should not continue to be</p> <p>9 prescribed certainly at a level of 120 MME or</p> <p>10 higher. So, you know --</p> <p>11 Q. Is it Summit's contention that</p> <p>12 every prescription included in the list of --</p> <p>13 that meets the criteria no cancer diagnosis,</p> <p>14 120 MME, and opioid use disorder, that all of</p> <p>15 those are improper prescriptions?</p> <p>16 MS. KEARSE: Object to form.</p> <p>17 A. Summit County contends that these</p> <p>18 are identified in response to the request of</p> <p>19 defense counsel and that certainly if we take</p> <p>20 away two out of the three and we just say these</p> <p>21 people have opiate abuse disorder, Summit</p> <p>22 County's position would be that alone would red</p> <p>23 flag them to us that they should have been</p> <p>24 looked at.</p> <p>25 Q. Do you know whether Rawlings used</p>
<p style="text-align: right;">Page 327</p> <p>1 Q. In identifying the prescriptions</p> <p>2 that were provided to the Defendants in</p> <p>3 response to these interrogatories, is it</p> <p>4 Plaintiff's contention that those prescriptions</p> <p>5 were for chronic pain?</p> <p>6 A. That all of these prescriptions</p> <p>7 were for chronic pain --</p> <p>8 Q. Yes.</p> <p>9 A. -- in these exhibits?</p> <p>10 I -- I don't know, again, what they</p> <p>11 were for. I know they were not for cancer</p> <p>12 treatment.</p> <p>13 Q. What does the "not for cancer</p> <p>14 treatment" criteria mean?</p> <p>15 A. Exactly what it states, that these</p> <p>16 were not people who were diagnosed with cancer.</p> <p>17 Q. So this list of prescriptions could</p> <p>18 have appropriate prescriptions included that</p> <p>19 are for other reasons, not cancer, but because</p> <p>20 it didn't meet the cancer criteria, it's</p> <p>21 included on that list; is that correct?</p> <p>22 MS. KEARSE: Object to form.</p> <p>23 Outside the scope, as well.</p> <p>24 A. I -- I don't know that I could</p> <p>25 answer that, other than to say, without having</p>	<p style="text-align: right;">Page 329</p> <p>1 any source information, patient files or</p> <p>2 anything, such as that to confirm that the list</p> <p>3 includes those with opioid use disorder?</p> <p>4 MS. KEARSE: Objection. Asked and</p> <p>5 answered.</p> <p>6 A. I don't know what methodology</p> <p>7 Rawlings used.</p> <p>8 Q. Still within Exhibit 11, I'd like</p> <p>9 to direct your attention back to page 14,</p> <p>10 please.</p> <p>11 The very last part of that page,</p> <p>12 it's the last partial paragraph that bleeds</p> <p>13 over into the next page, there is, near the</p> <p>14 end -- near the end of that partial paragraph,</p> <p>15 about three lines down, over to the right, do</p> <p>16 you see, "Based upon a review"?</p> <p>17 A. I do.</p> <p>18 Q. Do you see where I am?</p> <p>19 A. I do.</p> <p>20 Q. It reads, "Based upon a review of</p> <p>21 relative call notes, Bellwether Plaintiffs</p> <p>22 contend that Manufacturer Defendants</p> <p>23 systematically omitted or misrepresented the</p> <p>24 risk of addiction, failed to accurately</p> <p>25 disclose the risk of addiction, provided false</p>

<p style="text-align: right;">Page 330</p> <p>1 assurance that addiction is rare among patients 2 taking opioids for pain," and it continues, 3 "and/or can be identified or managed, and 4 failed to disclose the risk of addiction 5 increase with longer duration of opioid use or 6 higher doses," and then it continues. 7 Did I read that correctly? 8 A. Yes. 9 Q. Did the Plaintiffs, did Summit 10 County review call notes in determining the 11 criteria applied to the list of prescriptions? 12 MS. KEARSE: Objection. Outside 13 the scope. 14 A. I know that call notes have been 15 produced as a part of discovery. The decision 16 for setting the criterion was left to the 17 attorneys and the experts. 18 Q. So you don't know whether any 19 specific call notes were reviewed to set those 20 criteria for this list? 21 A. I do not know that. 22 Q. Turning your attention now to what 23 we have marked as Exhibit 10. Exhibit 10 is 24 one of the documents that you took a look at in 25 preparation for today's deposition, right?</p>	<p style="text-align: right;">Page 332</p> <p>1 disorder? 2 A. By Rawlings? 3 Q. Yes. 4 A. I do not know Rawlings' 5 methodology. 6 Q. And similarly, then, you don't know 7 what source documents they may have looked at 8 to confirm that? 9 A. I do not. 10 Q. Does Summit County contend that 11 each of the individuals who had an opioid use 12 disorder and received a prescription for a 13 prescription opioid, that that prescription was 14 improper? 15 MS. FLOWERS: Object to the form. 16 MS. KEARSE: Objection. Outside of 17 the scope, as well. 18 A. I don't know that that is the legal 19 contention being made, but certainly as we sit 20 here, as I sit here today on behalf of the 21 County, it would seem to me that every person 22 with a diagnosed opioid disorder still 23 receiving over 120 morphine equivalent 24 milligrams, that was a problem. Certainly was 25 a problem.</p>
<p style="text-align: right;">Page 331</p> <p>1 A. I need to look again. 2 Q. Yes, please, feel free. 3 MS. KEARSE: Take your time. 4 A. Yes. 5 Q. This document includes the 6 Plaintiffs's responses to Manufacturer 7 Interrogatory No. 7 and No. 10, right? 8 A. Yes. 9 Q. Directing your attention to the -- 10 the fourth page. The pages are not numbered -- 11 A. Sure. 12 Q. -- but you see Manufacturer 13 Interrogatory No. 7 at the top? 14 A. I do. 15 Q. In the answer, the second sentence 16 in the response reads, "Each individual has a 17 diagnosis of opioid use disorder and therefore 18 has suffered and/or continues to suffer 19 significant harm." 20 Do you see that? 21 A. I do. 22 Q. Did I read that correctly? 23 A. Yes. 24 Q. Do you know what criteria were used 25 to determine that a patient had opioid use</p>	<p style="text-align: right;">Page 333</p> <p>1 Q. Does Summit County contend that 2 those individuals identified in the list of 3 prescriptions with an opioid use disorder 4 developed that disorder as a result of some 5 wrongdoing by the Defendants? 6 A. The marketing was so pervasive, and 7 the availability was so readily procured that 8 it absolutely had an impact on this. The -- 9 the false narrative that this was a safe way to 10 treat things like chronic pain or injury from 11 sports or injury from a work accident, that was 12 pervasive in this community, and it was 13 inaccurate. So it absolutely impacted it. 14 Q. Did Summit County do anything to 15 rule out other possible causes for the opioid 16 use disorder, aside from Defendants' conduct? 17 A. I'm sorry. Did we -- did Ra- -- I 18 don't understand your question. 19 MS. KEARSE: I think we changed 20 gears, right? 21 Q. Did Summit County do anything to 22 rule out any other cause for the opioid use 23 disorder, aside from the alleged wrongdoing of 24 the Defendants? 25 A. As far as getting these lists?</p>

<p style="text-align: right;">Page 334</p> <p>1 Q. As far as the -- the wrongdoing 2 that you just testified about that led to 3 opioid use disorder, did Summit County do 4 anything to rule out any other causes of that 5 opioid use disorder? 6 A. There are no other causes to opioid 7 use disorder, other than the pervasive 8 availability of opioids in our community. I 9 don't know if you're asking specifically about 10 these folks, but there is one root cause for 11 why we are here today, and it is 40 million 12 pills in my community in one year. 13 Q. So it's your testimony that anyone 14 with opioid use disorder developed that 15 disorder because of some wrongdoing by the 16 Defendants; is that right? 17 A. I think when the Defendants 18 knowingly misrepresented what these pills were 19 going to cause and what this would lead to, 20 that even an appropriately prescribed person, 21 meaning a doctor relying on that information 22 wants to treat the person in front of him, I -- 23 I absolutely believe that the wrongdoing of the 24 Defendants is part of every piece of the 25 addiction process.</p>	<p style="text-align: right;">Page 336</p> <p>1 "Answer." 2 A. Got it. 3 Q. Are you there? 4 A. Yes. 5 Q. And feel free to read that 6 sentence. I won't -- 7 A. Okay. 8 Q. -- read it into the record. 9 A. The second sentence of the 10 paragraph? 11 Q. Yeah. The -- actually, the very 12 last sentence of the paragraph. 13 A. Okay. Oh, okay. I see it, yes. 14 Q. If I could now direct your 15 attention to what we've marked as Exhibit 17. 16 A. Yes. 17 Q. Do you understand Exhibit 17 to be 18 the Exhibit B that's referenced in Exhibit 10? 19 A. I do. 20 Q. Do you know what criteria Summit 21 County used to identify the individuals listed 22 in Exhibit B? 23 A. I know that these came from our 24 medical examiner's office, and something either 25 in the toxicology report for the decedent or</p>
<p style="text-align: right;">Page 335</p> <p>1 Q. Directing your attention back to 2 Exhibit 10, that same paragraph that we were 3 just in. 4 A. Okay. 5 Q. The next sentence reads, "In 6 addition, Exhibit B identifies certain 7 individuals in the bellwether jurisdictions who 8 died from overdoses as a result of the use of 9 prescription opioids." 10 A. I think I'm on the wrong page. I'm 11 sorry. 12 Q. Sure, yeah. Yeah, let's get -- 13 it's -- we're in Exhibit 10. 14 A. Yes. Page 4? 15 Q. Page 4. They aren't numbered. 16 A. Yes, okay. 17 Q. So at the top it says 18 Manufacturer -- 19 A. Interrogatory, yes. 20 Q. -- Interrogatory No. 7. Then I'm 21 in the "Answer" section. 22 A. Okay. Exhibit B identifies. 23 Q. Yeah. 24 A. Got it. 25 Q. The first full paragraph under</p>	<p style="text-align: right;">Page 337</p> <p>1 something else within the autopsy would have 2 led Dr. Kohler to create this list. 3 Q. Do you know what criteria 4 Dr. Kohler, or whoever participated in the 5 preparation of Exhibit B, applied to determine 6 whether the individuals purportedly died of an 7 overdose of prescription opioids? 8 A. I -- I believe that, again, it 9 was -- it was reflected in the toxicology 10 screen or something in the history included in 11 the autopsy, that these -- this list is 12 reflective of prescription opioids. 13 Q. Do you know whether that list is 14 overdoses of prescription opioids? 15 A. It's listed as overdose deaths, 16 yes. 17 Q. Do you know whether the medical 18 examiner and anyone who assisted in the 19 preparation of Exhibit B is able to identify 20 which prescription opioids are associated with 21 the overdose deaths listed? 22 MS. KEARSE: Object to form. 23 A. I mean, unless there was a pill 24 bottle next to the person, and certainly 25 however long the person had been deceased</p>

Page 338

1 before blood and urine samples were taken, that
2 can -- that can impact the levels that are
3 returned in the toxicology screen, and -- and
4 many of these prescription pills they tend to
5 metabolize. You end up with morphine
6 equivalent.
7 And so I would think that the only
8 way to do that was if there was a known
9 history, a prescription pill bottle at the
10 scene, something like that. But certainly the
11 toxicologist who was deposed spoke to that sort
12 of, you know, more fluently than I can.
13 Q. Do you know whether Exhibit 17,
14 which is Exhibit B to Interrogatory No. 7 -- a
15 lot of exhibit references -- do you know
16 whether that listing includes only prescription
17 overdose deaths of prescription opioids
18 manufactured by Defendants in this case, as
19 opposed to other manufacturers of prescription
20 opioids?
21 A. I do not know the answer to that.
22 THE VIDEOGRAPHER: Excuse me,
23 Ms. Johnson.
24 THE WITNESS: Yes.
25 THE VIDEOGRAPHER: Could you slide

Page 339

1 your microphone up for me?
2 THE WITNESS: Oh, gosh, yes, sorry.
3 MS. FEINSTEIN: You okay?
4 THE WITNESS: Yeah, I think I keep
5 stepping on.
6 Q. Staying within Exhibit 10, I'd like
7 to direct your attention now to page 5 or the
8 response to Manufacturer Interrogatory No. 10.
9 Have you reviewed this response to
10 Manufacturer Interrogatory No. 10 before?
11 A. Yes, I've read this.
12 Q. The individuals identified in the
13 answer, is it your understanding that those are
14 physicians who prescribed prescription opioids?
15 A. Yes.
16 Q. The individuals listed are
17 identified in the response as those prosecuted
18 or disciplined doctors, to the Plaintiff's
19 knowledge; is that right?
20 A. Yes, correct.
21 Q. So it's your understanding that
22 each of these individuals listed here was
23 prosecuted or otherwise disciplined; is that
24 right?
25 A. That's right.

Page 340

1 Q. Do you know whether the physicians
2 listed in response to Interrogatory No. 10 are
3 the prescribers of the prescriptions that were
4 identified by the Plaintiffs in response to the
5 interrogatories?
6 A. I can see some of their names on
7 the front page, so I -- I know that they are
8 included in these, in these Exhibits 12
9 through -- 12, 13, 15 and 16. I can see a few
10 of the names at least.
11 Q. Do you know whether a prescription
12 being written by one of these prescribers was
13 an additional criteria applied by Rawlings to
14 generate the list of prescriptions?
15 A. It's my understanding that these
16 lists were created based on the three criterion
17 given to them by our counsel.
18 Q. So it -- it is just coincidental
19 that some of these prescribers are included in
20 that list?
21 MS. FLOWERS: Object to form.
22 A. Well, I mean, these are -- I don't
23 know that coincidental is really the word.
24 These doctors were clearly either convicted of
25 crimes or held responsible for improper

Page 341

1 prescribing, so it certainly is no surprise
2 that they would be in these lists.
3 Q. Do you have any information about
4 whether any of the prescriptions written by
5 these physicians who were prosecuted or
6 disciplined were prescribed based on any action
7 of any of the Defendants in this case?
8 A. Well, we know that calls were still
9 being made to these doctors even after
10 suspected improper prescriptions were being
11 written, so certainly the manufacturers were
12 sending folks out to call upon these doctors,
13 even in some instances when these -- the reps
14 had indicated that there may have been a
15 problem, so --
16 Q. And do you -- sorry.
17 A. -- so the manufacturers were still
18 certainly contacting and the prescriptions were
19 obviously still being filled.
20 Q. Do you know whether any of the
21 prescriptions written by any of the individuals
22 listed in the answer to Interrogatory No. 10
23 were written as a result of information
24 provided by any manufacturer to those
25 physicians?

Page 342

1 MS. KEARSE: Objection. Outside
2 the scope.
3 A. Any information provided to them?
4 Q. Uh-huh. Yeah, you just mentioned
5 that you know, from information that you've
6 reviewed --
7 A. Yeah.
8 Q. -- that some of these physicians
9 continued to be visited --
10 A. Right.
11 Q. -- by representatives of the
12 manufacturers. Were any of their prescriptions
13 written in reliance on information provided to
14 them by those representatives?
15 MS. KEARSE: And I'll let you
16 answer, but I think we're way out of the scope
17 of what -- if we're still on the criteria, this
18 is way out of the scope of what Ms. Johnson is
19 here to testify about, the criteria that was
20 used to generate the exhibits in front of her.
21 A. I -- I can't -- I -- I don't know
22 how to answer that question on -- on what
23 information the doctors relied, but I'm -- what
24 I will say is that many of the patients who
25 were going to these doctors certainly started

Page 343

1 out taking opioids based on their reliance on
2 information from the manufacturers that these
3 would not be habit forming and that they would
4 not become addicted.
5 Q. Did the Plaintiffs' criteria in
6 identifying these doctors in response to
7 Interrogatory No. 10, did it include speaking
8 with any of these physicians?
9 MS. KEARSE: Objection. Asked and
10 answered. I think the witness has testified
11 it's a criteria used for Topics 4, 5, 6, and
12 19, and you're going out of the scope and
13 asking additional questions that just have no
14 bearing on her testimony today as a 30(b)
15 representative.
16 A. I -- I do not know if -- I know
17 that they spoke to some doctors. I do not know
18 if the list included the doctors who have been
19 convicted.
20 Q. Do you know whether any of the
21 listed prescriptions that were provided to the
22 Defendants were responsive to only one of the
23 interrogatories, as opposed to all three of the
24 interrogatories? Strike that.
25 A. I don't follow that.

Page 344

1 Q. Let me re-ask it.
2 A. Okay.
3 Q. That was an awkward question.
4 Is it your understanding that the
5 prescriptions that were identified by the
6 Plaintiffs are responsive to all three of the
7 interrogatories that we just discussed, so
8 Interrogatory No. 6, Interrogatory No. 7, and
9 Interrogatory No. 10?
10 A. That's my understanding.
11 Q. Do you have any understanding of
12 whether there are any prescriptions in those
13 identified that do not apply to all three and
14 that only apply to either one, two, or three of
15 those interrogatories?
16 A. If I could review the
17 interrogatories so that I could be clear on
18 that. I --
19 Q. And you have the interrogatories in
20 front of you.
21 A. Okay.
22 Q. So Exhibit 10 and Exhibit 11 --
23 A. Eleven.
24 Q. -- have the interrogatories.
25 A. Oh, there it is. Okay. So your

Page 345

1 question is, are these responsive to all three
2 at the same time?
3 Q. Yeah -- yes. So is that list, does
4 that -- does the list of prescriptions provided
5 by the Plaintiffs respond to Interrogatory
6 No. 6, Interrogatory No. 7, and Interrogatory
7 No. 10?
8 A. Okay.
9 MS. KEARSE: And again, Counsel, I
10 think she's -- Ms. Johnson has testified to the
11 criteria used in Exhibits A and B, Exhibits 12
12 through 16 already. This is getting to be to
13 the point of way outside the scope.
14 MS. FEINSTEIN: You'll be glad to
15 know it's my last question. I just want to
16 understand --
17 MS. KEARSE: Okay. And then we
18 keep going.
19 MS. FEINSTEIN: -- if that list
20 applies to all these. On this. Not my last
21 question all day.
22 THE WITNESS: So this is six.
23 A. Based on reviewing the
24 interrogatories again, Exhibits 12 through 16
25 respond to all three individually and as a

<p style="text-align: right;">Page 346</p> <p>1 whole.</p> <p>2 Q. Thank you. You're also designated,</p> <p>3 thankfully, on some other topics, right?</p> <p>4 A. I mean...</p> <p>5 Q. We can continue talking about those</p> <p>6 lists, if you'd like, but --</p> <p>7 A. Thankfully is your word.</p> <p>8 Q. -- I'm ready to move on.</p> <p>9 A. Okay. Let's do this. Yes.</p> <p>10 Q. Feel free to move those out of your</p> <p>11 way if you'd like.</p> <p>12 A. Yeah.</p> <p>13 Q. You were also designated on Topic 3</p> <p>14 in the 30(b)(6) notice; is that right?</p> <p>15 A. Correct.</p> <p>16 Q. And that topic is Plaintiffs'</p> <p>17 knowledge of concerns or complaints made to the</p> <p>18 Plaintiffs or by the Plaintiffs of any</p> <p>19 promotion, marketing, educational activities</p> <p>20 with respect to prescription opioids, within or</p> <p>21 relating to the Plaintiffs' geographic area and</p> <p>22 actions taken by the Plaintiff or others in</p> <p>23 response to those concerns or complaints.</p> <p>24 Are you prepared to testify on that</p> <p>25 topic?</p>	<p style="text-align: right;">Page 348</p> <p>1 know. Mine's double sided. I don't know if</p> <p>2 that --</p> <p>3 MS. KEARSE: And I wasn't</p> <p>4 suggesting you were -- I just wanted to -- I</p> <p>5 wanted to make sure we were reading off the</p> <p>6 same one.</p> <p>7 MS. FEINSTEIN: Absolutely. And I</p> <p>8 want to make sure that the witness is</p> <p>9 comfortable responding to the questions.</p> <p>10 THE WITNESS: Could I ask someone</p> <p>11 to get more water --</p> <p>12 MS. KEARSE: Yeah.</p> <p>13 THE WITNESS: -- if there's any</p> <p>14 more over there.</p> <p>15 MS. KEARSE: I don't know.</p> <p>16 Q. Are you okay to continue?</p> <p>17 A. Yeah, I just --</p> <p>18 Q. Okay. You just need some more --</p> <p>19 A. I -- apparently I'll stop breathing</p> <p>20 if I stop drinking water today.</p> <p>21 Q. Thanks. If you need to take a</p> <p>22 break --</p> <p>23 A. Sure. No, I --</p> <p>24 Q. -- let me know.</p> <p>25 But if you could please, then,</p>
<p style="text-align: right;">Page 347</p> <p>1 A. I am.</p> <p>2 Q. What did you do to prepare --</p> <p>3 MS. KEARSE: Counsel, I just want</p> <p>4 to make sure that's reading number three. I</p> <p>5 thought three was changed.</p> <p>6 MS. FEINSTEIN: Oh, sure. If it</p> <p>7 was, yeah, feel free. I thought I was reading</p> <p>8 Special Master Cohen --</p> <p>9 MS. KEARSE: Are you reading</p> <p>10 Exhibit 3? Okay.</p> <p>11 MS. FEINSTEIN: I wasn't reading</p> <p>12 from it. I was reading what should have been</p> <p>13 typed from it.</p> <p>14 MS. KEARSE: Okay.</p> <p>15 MS. FEINSTEIN: But, yeah, I</p> <p>16 think -- so I don't want to --</p> <p>17 MS. KEARSE: Okay. So I just</p> <p>18 wanted to make sure you were reading --</p> <p>19 MS. FEINSTEIN: Yeah.</p> <p>20 MS. KEARSE: -- off of Exhibit B.</p> <p>21 MS. FEINSTEIN: Yes.</p> <p>22 Q. And feel free, Ms. Johnson, if</p> <p>23 you'd like to look at Exhibit 1 --</p> <p>24 A. Yep.</p> <p>25 Q. -- it is the second to last page, I</p>	<p style="text-align: right;">Page 349</p> <p>1 referring to Exhibit 1, take a look at Topic</p> <p>2 No. 3 --</p> <p>3 A. Yes, ma'am.</p> <p>4 Q. -- and let me know whether you are</p> <p>5 prepared to testify on behalf of Summit County</p> <p>6 as to that topic as modified by Special Master</p> <p>7 Cohen and hopefully as read correctly by me in</p> <p>8 the record a moment ago.</p> <p>9 A. Yes, I am.</p> <p>10 Q. Did you talk to the anybody to --</p> <p>11 besides counsel to prepare for your testimony</p> <p>12 in response to that topic?</p> <p>13 A. I -- I talked with, you know, the</p> <p>14 individuals that I listed before about a</p> <p>15 variety of different topics, but frankly the</p> <p>16 people I've talked to about this particular</p> <p>17 interrogatory have come throughout the last 15</p> <p>18 years of being in the community and in the jobs</p> <p>19 that I've served.</p> <p>20 So I spoke with Detective Leonard</p> <p>21 about it a little bit, and obviously with</p> <p>22 counsel. But certainly the conversations that</p> <p>23 I've had outside of the preparation or outside</p> <p>24 specific preparation for today, inform my</p> <p>25 answers on this as well.</p>

<p style="text-align: right;">Page 350</p> <p>1 Q. Just to make sure I'm 2 understanding, too, so for purposes of your 3 testimony on behalf of Summit County as its 4 designee on this topic, did you speak with 5 anyone else within Summit County just for 6 preparation for this topic specifically? 7 A. I did. I spoke with the executive 8 about it and asked for her input as well, and I 9 spoke with the public safety director, Lori 10 Pesci, about that. 11 Q. When did Summit County first have 12 concerns or complaints about the promotion of 13 prescription opioids? 14 A. I would say that Summit County 15 first became aware of the pharmaceutical 16 industry's role in our growing epidemic toward 17 the end of 2014 and into 2015 when the Opiate 18 Task Force came together, and started to put 19 the numbers in front of all of us about just 20 how many pills per capita were being 21 distributed in our community. 22 Q. My question is a little bit 23 different than that. 24 A. Okay. 25 Q. So my question is, when did Summit</p>	<p style="text-align: right;">Page 352</p> <p>1 pharmaceutical industry was being honest, was 2 not going to put pills into our community at 3 this rate that could harm the people who live 4 here. 5 Q. Is there any specific promotion 6 that you learned of that -- strike that. 7 Is there any specific promotion 8 that Summit County learned of in 2014-2015 that 9 caused it concern at that time? 10 A. The conversations in those task 11 force meetings centered around, quite frankly, 12 the pleas from parents who witnessed it 13 firsthand, that their child had become addicted 14 after being told that this was a safe and 15 effective way to treat pain. 16 And I've said it several times 17 because it's true: The people who pointed us 18 in the direction of the pharmaceutical 19 manufacturing and distributing industry were 20 the family members of people who are suffering 21 from addiction. 22 Q. And my question is about promotion. 23 A. Right. 24 Q. So what -- is there any specific 25 promotion that Summit County learned of in 2014</p>
<p style="text-align: right;">Page 351</p> <p>1 County first have concerns or complaints about 2 the promotion of prescription opioids? 3 A. So same -- same answer. 4 MS. KEARSE: I'm going object. 5 Asked and an- -- I was going to say asked and 6 answered, yes. 7 A. Same answer. Because that -- it 8 was in those Opiate Task Force meetings where 9 the conversation first started with, we all 10 have one thing in common here, and it's the 11 pharmaceutical industry. So -- so it was 12 really in those early 2015, throughout 2015 13 where, I mean, quite frankly we started looking 14 at who was to blame. 15 Q. So it's your testimony that Summit 16 County had no concerns about opioid 17 manufacturers' promotion of prescription 18 opioids at any point in time prior to 2014 or 19 2015; is that right? 20 A. No concern? 21 Q. Uh-huh. 22 A. There was not an alarming concern 23 at that time. I think Summit County, its 24 residents, its officials were still operating 25 under this dangerous belief that the</p>	<p style="text-align: right;">Page 353</p> <p>1 or 2015 that it viewed as improper? 2 A. There's no specific promotion, but 3 the pervasive nature of the messaging coming 4 from the manufacturers blanketed the community. 5 Q. You've reviewed the complaint filed 6 on behalf of Summit County and the City of 7 Akron in this litigation, right? 8 A. I have. 9 Q. You're aware that that complaint 10 includes allegations regarding activities 11 engaged in by the Manufacturing Defendants 12 related to the promotion of prescription 13 opioids dating back into the 2000s; is that 14 right? 15 A. Correct, yes. 16 Q. Was Summit County aware of that 17 promotion of prescription opioids in 2007-2008 18 time period? 19 A. I'm sure we were aware of it. We 20 did not know the harmful effects it would have 21 at that point. I don't know that -- those 22 promotional materials were available in, I 23 believe you said 2007. I don't know that 24 Summit County -- in fact I know that Summit 25 County didn't know how harmful and the danger</p>

<p style="text-align: right;">Page 354</p> <p>1 that we would incur as a result of those at 2 that time.</p> <p>3 Q. Do you know whether the State of 4 Ohio had identified any concerns with 5 pharmaceutical manufacturers' promotion of 6 prescription opioids in 2010?</p> <p>7 A. I -- I know now that there was a 8 governor's task force that convened and issued 9 a report in October of 2010, but that didn't 10 reach Summit County. The people I've spoken to 11 in Summit County had not seen that.</p> <p>12 And there are a number of reasons 13 why, not the least of which is that was a very 14 brief period of time when the governor and 15 house of representatives were both Democratic, 16 and about 35 days after that report was issued, 17 there was a dramatic shift in Ohio politics and 18 a Republican governor was elected and the 19 Republican contingency took over control of the 20 Statehouse, and there was a dramatic shift in 21 ideology and priorities at that time.</p> <p>22 So the 2010 report became obsolete, 23 in effect, about 35 days after it was issued.</p> <p>24 Q. So it's -- it's your testimony that 25 Summit County had no concerns or complaints</p>	<p style="text-align: right;">Page 356</p> <p>1 that. I know that Prosecutor Gessner, who was 2 deposed, was not familiar with that. I've 3 asked -- I asked Detective Leonard if he was 4 familiar with it. I asked -- I don't -- I 5 can't recall if Donna Skoda was familiar with 6 it.</p> <p>7 Q. Did you talk with Dr. Smith about 8 it?</p> <p>9 A. I did not. I did not have a 10 conversation with Dr. Smith to prepare.</p> <p>11 Q. Do you know if Dr. Smith or others 12 who are active at the ADM Board and with -- 13 within the Summit County Opiate Task Force, 14 whether or not they had information regarding 15 that report prior to 2014-2015?</p> <p>16 A. I don't know if they did or not.</p> <p>17 Q. You reviewed Dr. Smith's 18 transcript, right?</p> <p>19 A. I did.</p> <p>20 Q. Do you recall seeing any testimony 21 from Dr. Smith that he was aware of at least 22 concerns with pharmaceutical manufacturers' 23 promotion of opioids prior to the formation of 24 the Opiate Task Force?</p> <p>25 A. Yes. I recall that we had</p>
<p style="text-align: right;">Page 355</p> <p>1 about any manufacturer promotion or marketing 2 or educational activities related to 3 prescription opioids prior to 2014; is that 4 right?</p> <p>5 A. I think that's fair.</p> <p>6 Q. And it was the information that 7 Summit County learned through the opioid task 8 force that it formed in 2014 that allowed it to 9 make that connection between its allegations 10 related to promotional activities of the 11 pharmaceutical manufacturers to the opioid 12 issues within Summit County; is that right?</p> <p>13 A. Absolutely. There were specific 14 meetings where you could feel the ripple effect 15 of realization in the room.</p> <p>16 Q. And it's further your testimony 17 that Summit County had no knowledge of the 18 governor's task force report that identified 19 several criteria --</p> <p>20 A. Sure.</p> <p>21 Q. -- including, among them, promotion 22 of prescription opioids as a potential factor 23 in opioid misuse?</p> <p>24 A. I was a prosecutor when that came 25 out. I did not -- I was not familiar with</p>	<p style="text-align: right;">Page 357</p> <p>1 concerns. I believe his testimony also talked 2 about the direct marketing to patients, in 3 addition to the marketing materials provided to 4 doctors. So I believe that there was an 5 acknowledgement that they were aware that -- 6 that there was an issue.</p> <p>7 Q. Do you recall his testimony that he 8 could not remember any direct-to-consumer or 9 direct-to-patient marketing regarding 10 prescription opioids?</p> <p>11 A. I -- I remember him talking about 12 it. I thought it was the opposite. I could be 13 mistaken.</p> <p>14 Q. Have you seen any direct-to- 15 consumer marketing related to opioids?</p> <p>16 A. I can't say that recently I can 17 recall anything like that.</p> <p>18 Q. Do you have any information about 19 any specific promotion of opioids within Summit 20 County that caused Summit County any concerns, 21 whether you learned of it in 2014 or otherwise?</p> <p>22 MS. KEARSE: Object to form.</p> <p>23 A. Could you say that again?</p> <p>24 Q. Sure. Yeah, it was a little 25 confusing.</p>

<p style="text-align: right;">Page 358</p> <p>1 Do you have any information about</p> <p>2 any promotion of prescription opioids that</p> <p>3 occurred within Summit County that raised a red</p> <p>4 flag for Summit County and caused Summit County</p> <p>5 concern?</p> <p>6 MS. KEARSE: Object to form.</p> <p>7 A. Just what we've talked about</p> <p>8 when -- when we came together and looked at</p> <p>9 the -- the number of pills being prescribed in</p> <p>10 our community, those don't get prescribed by</p> <p>11 accident. They don't get prescribed without</p> <p>12 active promotion and marketing to consumers and</p> <p>13 to the physicians in our area. 40 million</p> <p>14 pills don't happen by accident of the industry.</p> <p>15 Q. Where is the 40 million pills</p> <p>16 number from?</p> <p>17 A. So in 2010, there were 71.6 pills</p> <p>18 per every man, woman, and child in Summit</p> <p>19 County.</p> <p>20 In 2012, it was 72.8, I believe.</p> <p>21 And when you multiply that by the</p> <p>22 over 451,000 -- 541,000 residents in Summit</p> <p>23 County, you get upwards of 40 million pills.</p> <p>24 Q. And from where do you get the data</p> <p>25 71.6 and 72.8?</p>	<p style="text-align: right;">Page 360</p> <p>1 her scope.</p> <p>2 Q. And I'm asking about marketing.</p> <p>3 You don't have any information about whether</p> <p>4 the marketing or promotion of prescription</p> <p>5 opioids is regulated at all by the FDA?</p> <p>6 MS. KEARSE: The same objection.</p> <p>7 A. I don't know if the FDA regulates</p> <p>8 those.</p> <p>9 Q. Is it Summit's position that it --</p> <p>10 strike that.</p> <p>11 When did Summit County first learn</p> <p>12 of educational activities engaged in by</p> <p>13 manufacturers of prescription opioids that</p> <p>14 caused it concern?</p> <p>15 A. I don't think I follow your</p> <p>16 question. Educational activities that the</p> <p>17 manufacturers were putting on?</p> <p>18 Q. Yes.</p> <p>19 A. Oh, for doctors?</p> <p>20 Q. Regarding prescription opioids,</p> <p>21 uh-huh.</p> <p>22 A. I don't know the answer to that</p> <p>23 question.</p> <p>24 Q. Do you draw a distinction between</p> <p>25 the term promotion and marketing?</p>
<p style="text-align: right;">Page 359</p> <p>1 A. Sure. That's the OARRS data that's</p> <p>2 compiled by the Summit County Public Health.</p> <p>3 That's on their data dashboard.</p> <p>4 Q. You understand that prescription</p> <p>5 opioids are regulated by the Food and Drug</p> <p>6 Administration, right?</p> <p>7 A. Yes.</p> <p>8 Q. You also understand that</p> <p>9 prescription opioids are -- are approved by the</p> <p>10 FDA to be available for prescription in the</p> <p>11 United States, right?</p> <p>12 A. I do understand there's a process</p> <p>13 to that, yes.</p> <p>14 Q. Do you have any understanding</p> <p>15 regarding the FDA's role with respect to</p> <p>16 marketing or promotion of pharmaceutical</p> <p>17 products that are approved by it?</p> <p>18 A. Do I have an understanding of how</p> <p>19 they're involved with marketing?</p> <p>20 Q. Do you have any understanding of</p> <p>21 whether they're involved at all?</p> <p>22 A. I don't, actually.</p> <p>23 MS. KEARSE: Counsel, I think there</p> <p>24 was a separate 30(b) specific to FDA that we</p> <p>25 submitted in writing, so it may be outside of</p>	<p style="text-align: right;">Page 361</p> <p>1 A. Marketing is -- the distinction I</p> <p>2 draw between promotion and marketing is</p> <p>3 marketing is the -- the tangibles, whether it's</p> <p>4 paper or advertisements. Sort of the</p> <p>5 in-passive parts.</p> <p>6 Promotion, to me, is reps going</p> <p>7 out, meeting with docs, promoting the effects</p> <p>8 and the efficacy of the medications.</p> <p>9 Q. My questions earlier about when</p> <p>10 Summit County first became concerned, I used</p> <p>11 the term "promotion," so now I'll ask the</p> <p>12 same --</p> <p>13 A. Oh, okay.</p> <p>14 Q. -- question regarding marketing --</p> <p>15 A. Sure.</p> <p>16 Q. -- to see if there's any different</p> <p>17 response. So the topic includes both terms, so</p> <p>18 I want to ask about both.</p> <p>19 When did Summit County first become</p> <p>20 concerned or receive complaints about the</p> <p>21 marketing of prescription opioids within Summit</p> <p>22 County?</p> <p>23 A. The same answer. When we really --</p> <p>24 I understand that Dr. Smith and some others</p> <p>25 discussed some early warning signs, perhaps,</p>

<p style="text-align: right;">Page 362</p> <p>1 but it was not until the Opiate Task Force 2 convening in '14 and '15 that -- that that 3 really became a topic of conversation that 4 dominated the -- those meetings. 5 Q. Did Summit County contact the -- 6 the pharmaceutical manufacturers and complain 7 about their promotional or marketing activities 8 at that point? 9 MS. KEARSE: Object to form. 10 A. I think we were too busy trying to 11 treat people. I think we were too busy trying 12 to find new avenues and bed space for the 13 addiction crisis that we were facing. It was 14 not until, again, we -- we sort of put all of 15 the ducks in a row and came to the conclusion 16 that there was one common factor in all of 17 these stories, and that's when our -- our 18 attention was directed. 19 Q. Did Summit County report any 20 promotional activities to the FDA? 21 A. Not that I'm aware of. 22 Q. You've mentioned a few times 23 reference to the task force that began in the 24 2014 time period. And by that, are you 25 referring to the Summit County Opiate Task</p>	<p style="text-align: right;">Page 364</p> <p>1 A. I think that's fair. 2 Q. Did Summit County contact any 3 federal authorities to evaluate whether or not 4 the activities engaged in by the manufacturers 5 of prescription opioids may have violated 6 any -- any federal laws or regulations? 7 MS. KEARSE: Object to form. 8 A. We did not reach out to the FDA. I 9 mean, certainly our DEA agents were 10 investigating diversion, but as far as -- as 11 reporting the marketing or promotion, no, this 12 lawsuit is the way we've addressed that. 13 Q. Did Summit County enact any 14 ordinances or any sort of restrictions on the 15 ability of pharmaceutical manufacturers to 16 either visit physicians within its borders or 17 otherwise engage in promotion or marketing of 18 prescription opioids? 19 A. We don't have the authority to do 20 that. That's a federally regulated practice, 21 and the only other regulations are at the state 22 level. As a county council and the county 23 executive, and certainly in the city of Akron, 24 they don't -- none of us have the authority to 25 do that.</p>
<p style="text-align: right;">Page 363</p> <p>1 Force. 2 A. I am, yes. 3 Q. Are you aware of any other task 4 forces that were formed at an earlier time in 5 other counties or within the state of Ohio? 6 A. Well, we've discussed the 7 governor's report that was issued in 2010. 8 Before 2014, we had drug task force within the 9 county but beyond the law enforcement 10 perspective, I'm not aware of any community. 11 Q. Did -- I asked you if Summit County 12 reached out to the pharmaceutical manufacturers 13 or reached out to the FDA. 14 Did Summit County do any kind of 15 internal -- strike that. 16 Did Summit County institute any 17 sort of investigation into the promotional 18 activities of the pharmaceutical manufacturers 19 to determine whether it was wrongful activity? 20 MS. KEARSE: Object to form. 21 A. I mean, quite frankly, that's why 22 we engaged with counsel. 23 Q. So this lawsuit is the action that 24 Summit County decided to take when it made that 25 connection; is that right?</p>	<p style="text-align: right;">Page 365</p> <p>1 Q. And did Summit County reach out the 2 to any of those entities that would have 3 authority to do so and request limitations 4 within the borders of Summit County on the 5 activity that caused concern to Summit County? 6 A. I don't know that we specifically 7 talked about marketing promotions with our 8 federal representatives. I know that we talked 9 about the -- the need for treatment facilities, 10 the need for, you know, the continuation of 11 Medicaid expansion, the lifting of the bed 12 limit for Medicaid reimbursement. Our focus, 13 up and to the point that we filed this lawsuit, 14 has been on treating the victims of this 15 epidemic. 16 Q. Did Summit County reach out to the 17 FDA, recognizing Summit County's concern with 18 promotional activities of the pharmaceutical 19 companies, did Summit County reach out to the 20 FDA to request that it somehow limit the 21 ability of manufacturers to promote and market 22 prescription opioids? 23 MS. KEARSE: Object to form. 24 A. We did not reach out to the FDA. 25 MS. FEINSTEIN: Why don't we take a</p>

<p style="text-align: right;">Page 366</p> <p>1 break here.</p> <p>2 THE VIDEOGRAPHER: Off the record</p> <p>3 at 6:04.</p> <p>4 (A recess was taken.)</p> <p>5 THE VIDEOGRAPHER: On the record at</p> <p>6 6:24.</p> <p>7 BY MS. FEINSTEIN:</p> <p>8 Q. Thank you. Before the break, we</p> <p>9 were talking about Summit County's knowledge of</p> <p>10 concerns related to pharmaceutical promotion</p> <p>11 and marketing. Do you recall that?</p> <p>12 A. I do.</p> <p>13 Q. If you could take a look, if you'd</p> <p>14 like, at Exhibit 1, which is the notice of</p> <p>15 deposition that identifies the topics, just</p> <p>16 because I may bounce around a little bit, I</p> <p>17 just want to confirm on the record, the other</p> <p>18 topics that I'm going to address with you and</p> <p>19 for which you have been designated by Summit</p> <p>20 County to testify about are Topics 9 and 34, as</p> <p>21 modified by Special Master Cohen's order, which</p> <p>22 is the second to last page of Exhibit 1.</p> <p>23 Do you see that?</p> <p>24 A. I do.</p> <p>25 Q. If you could please review those</p>	<p style="text-align: right;">Page 368</p> <p>1 Q. At any time point prior to --</p> <p>2 strike that.</p> <p>3 Was it a specific discussion at a</p> <p>4 task force that flipped the switch for the</p> <p>5 County, that caused it to have concern about</p> <p>6 pharmaceutical promotion or marketing?</p> <p>7 MS. KEARSE: Object to form.</p> <p>8 A. There were specific slides. I</p> <p>9 remember very vividly being shown slides about</p> <p>10 the number of pills in our community. And as I</p> <p>11 said before, there was a collective -- it was</p> <p>12 almost like you could feel the light bulb.</p> <p>13 And that was when I recall</p> <p>14 specifically a parent of a child standing up</p> <p>15 and using the words "big pharma." I remember</p> <p>16 it very vividly. And that was truly one of the</p> <p>17 first times a real discussion was had in the</p> <p>18 county about what all of these stories we were</p> <p>19 discussing in these task force meetings had in</p> <p>20 common, and that was the opioid industry.</p> <p>21 Q. That meeting, there was no</p> <p>22 discussion specifically about any particular</p> <p>23 promotion or marketing; is that right?</p> <p>24 A. There was. There was a parent</p> <p>25 there who talked about doctors telling his</p>
<p style="text-align: right;">Page 367</p> <p>1 topics and let me know whether you're prepared</p> <p>2 to testify on behalf of Summit County as to</p> <p>3 Topics 9 and 34 as well.</p> <p>4 A. Yes. I've reviewed them, and I</p> <p>5 feel prepared to testify on behalf of Summit</p> <p>6 County.</p> <p>7 Q. Other than what you've described</p> <p>8 already regarding your preparation for today's</p> <p>9 deposition, did you do anything in addition to</p> <p>10 prepare specifically for your testimony with</p> <p>11 respect to Topics 9 or 34?</p> <p>12 A. Not in addition to what we've</p> <p>13 already discussed.</p> <p>14 Q. You mentioned that Summit County</p> <p>15 did not have knowledge or con- -- strike that.</p> <p>16 You mentioned earlier that Summit</p> <p>17 County did not have concerns about</p> <p>18 pharmaceutical promotion or marketing until</p> <p>19 2014; is that right?</p> <p>20 MS. KEARSE: Object to form.</p> <p>21 A. I -- I would say '14 -- I believe</p> <p>22 the Opiate Task force first met at, I want to</p> <p>23 say, December of '14. So it was very late '14</p> <p>24 and into '15 when those sort of realizations</p> <p>25 started to come to the forefront.</p>	<p style="text-align: right;">Page 369</p> <p>1 child, and being a part of that conversation,</p> <p>2 that these were safe and effective. And</p> <p>3 certainly, that information funneled down from</p> <p>4 the manufacturer through the doctor.</p> <p>5 Q. How does Summit County know that</p> <p>6 that information funneled down from a source</p> <p>7 other than the physician's own medical opinion?</p> <p>8 A. It was pervasive. I mean, I -- as</p> <p>9 a prosecutor, I had had interactions with</p> <p>10 individuals who had been robbed of their opioid</p> <p>11 pills, who talked about, "This is my long-term</p> <p>12 chronic pain maintenance." And there was an</p> <p>13 overwhelming presence of the idea that the</p> <p>14 manufacturers said this was okay, and this</p> <p>15 inherent trust of our community in the medical</p> <p>16 field, which includes the pharmaceutical field.</p> <p>17 Q. Do you know whether the</p> <p>18 prescription opioids that are available for</p> <p>19 prescription in the United States have</p> <p>20 prescribing information that comes with them</p> <p>21 that is FDA approved?</p> <p>22 A. Like the warnings that come --</p> <p>23 Q. Yes --</p> <p>24 A. -- in the -- I'm sure that they do.</p> <p>25 Q. Have you ever read those?</p>

<p style="text-align: right;">Page 370</p> <p>1 A. I'm sure I've read the ones that I 2 was prescribed. 3 Q. Do you know whether the information 4 that is provided with prescription opioids in 5 the United States includes a warning regarding 6 addiction? 7 A. I believe that it does. 8 MS. KEARSE: And, Counsel, I think 9 we established there's a specific 30(b) 10 specific to the FDA, which we responded to in 11 writing, and I'd say it's outside the scope of 12 Ms. Johnson's testimony. 13 Q. Is it your -- 14 MR. SCHUTTE: Hold on. I don't 15 know if we're going to do anything about this, 16 but the people on the phone, they've -- the 17 realtime feed has dropped again. 18 MS. FEINSTEIN: Oh, it has. Okay. 19 Do we need to go off the record to fix that? 20 THE VIDEOGRAPHER: Off the record 21 at 6:30. 22 (A recess was taken.) 23 THE VIDEOGRAPHER: On the record at 24 6:40. 25 BY MS. FEINSTEIN:</p>	<p style="text-align: right;">Page 372</p> <p>1 Task Force meeting in the 2014-2015 time frame 2 that addressed pharmaceutical marketing? 3 A. Other than the discussions we've 4 talked about at those meetings? 5 Q. You've discussed a parent reporting 6 a conversation with a physician. 7 A. Uh-huh. 8 Q. Was there anything specific 9 discussed about pharmaceutical marketing within 10 the context of that discussion? 11 A. I don't recall anything beyond the 12 slides and the parent and hearing those words 13 for the first time. 14 Q. Whose slides -- what slide deck are 15 you referring to? 16 A. I believe it was used as an exhibit 17 in Prosecutor Wilms' deposition. There were 18 some statistics put up about how many pills per 19 quarter were being put into Summit County, and 20 I remember being struck by the number and then 21 having the conversation with prosecutor Wilms, 22 who reminded me to multiply it by 4. 23 Q. Was -- it was -- strike that. 24 Who was presenting the slide deck? 25 A. It was Jerry Craig from the ADM. I</p>
<p style="text-align: right;">Page 371</p> <p>1 Q. Thank you. We had a few technical 2 issues, but hopefully we're -- we're back on 3 track. 4 MS. FEINSTEIN: If you could please 5 read the last question, because I've lost track 6 of where we were. 7 (Record read.) 8 MS. FEINSTEIN: Thank you. And 9 there was an objection. The witness answered. 10 I just wanted to confirm where we were. 11 MS. KEARSE: Okay. All right. 12 There was no pending -- there wasn't a pending 13 question. 14 MS. FEINSTEIN: Right, there was no 15 pending question. 16 MS. KEARSE: Right, right. 17 MS. FEINSTEIN: I mean, we lost 18 our -- 19 MS. KEARSE: Okay. 20 MS. FEINSTEIN: -- our connection. 21 Q. Other than that anecdotal 22 information that you reported from the task 23 force meeting, was there any specific 24 discussion about pharmaceutical marketing at 25 the Opioid Task -- the Summit County Opioid</p>	<p style="text-align: right;">Page 373</p> <p>1 can't recall if anybody was doing it in 2 conjunction, but the slides were from ADM. I 3 remember Jerry being at the front of the room. 4 Q. You testified earlier about numbers 5 of pills being available in 2010. 6 A. Uh-huh. 7 Q. In that time frame, right? 8 A. Uh-huh. 9 Q. Is that a yes? 10 A. Yes. I'm sorry, yes. 11 Q. Thanks. And you also testified 12 about the number of pills that Summit County 13 was aware of in 2012, right? 14 A. Correct. 15 Q. Does Summit County have any data 16 regarding the availability of prescription 17 opioids in Summit County prior to 2010? 18 A. I believe so. I believe that was 19 included in -- in some of the graphs that I 20 reviewed. I remember thinking that it had 21 peaked in 2010 and then reviewing another 22 document that I remember seeing the numbers 23 were even higher in 2012. 24 Q. What was the subject matter of 25 Mr. Craig's presentation, if you recall?</p>

<p style="text-align: right;">Page 374</p> <p>1 A. It was really sort of telling the 2 community, you want to know where these 3 problems are coming from, look at these 4 statistics to help us understand what's 5 happening here in our community. 6 Q. Aside from pharmaceutical 7 marketing, what factors does Summit County 8 contended affected prescribing of prescription 9 opioids in Summit County? 10 MS. KEARSE: Object to form. 11 A. There weren't any. I mean, the 12 prescribing came from the ind- -- the 13 prescribing practices were really informed by 14 the industry. 15 Q. Earlier, you testified about the 16 pain as the fifth vital sign. 17 A. Uh-huh, yes. 18 Q. What did you mean by that? 19 A. Well it -- prior to that, there 20 were only four. And it's my understanding that 21 when pain became the fifth vital sign, it 22 became a real driver in patient satisfaction, 23 and that many of the manufacturers participated 24 in patient satisfaction surveys, and that some 25 of the questions involved in these patient</p>	<p style="text-align: right;">Page 376</p> <p>1 such -- I wasn't a conspiracy theorist before I 2 started to understand the money that drives 3 this industry. And when I look at the human 4 capital that has been lost in my community as a 5 result of the improper actions of the 6 Defendants in this case, I can't point you to 7 an article other than I believe that they 8 participated in it. 9 I -- they've participated in so 10 many other changes in the medical field that I 11 think it would be naive of me to think that 12 they did not. I feel very naive that I was not 13 more focused on them before 2014-2015. 14 Q. So it's -- it's just your belief 15 that there's a connection; you didn't actually 16 read something that led you to have that 17 connection? 18 MS. KEARSE: Object to form. 19 A. On behalf of Summit County, I 20 believe that to be true, yes. 21 Q. But you can't think of anything 22 specific that you read that connects the 23 pharmaceutical industry with pain as the fifth 24 vital sign? 25 A. No.</p>
<p style="text-align: right;">Page 375</p> <p>1 satisfaction surveys are related to, did this 2 medication treat your pain? Are you better now 3 than you were then? 4 Q. Is it your understanding that the 5 manufacturers were behind pain as a fifth vital 6 sign? 7 A. I -- I don't know specifically that 8 I've read that, but everything that I've read 9 leads me to believe that the pharmaceutical 10 industry participated in the process of this 11 sort of shift in thinking about pain as the 12 fifth vital sign. 13 Q. What have you read that led you to 14 believe that the pharmaceutical manufacturers 15 were behind the -- the shift to pain as a fifth 16 vital sign? 17 A. As I said, I can't point to 18 anything specific other than the opinions I've 19 formed as a result of my time in this community 20 and preparing specifically for this deposition. 21 Q. And you just said, though, that 22 based on things that you read. So I want to 23 know what things did you read that led you to 24 that conclusion? 25 A. It's hard not to. This has become</p>	<p style="text-align: right;">Page 377</p> <p>1 Q. Have you ever heard of the Joint 2 Commission on Accreditation of Health 3 Organizations? 4 A. I don't believe I have. 5 Q. Did you ever hear -- strike that. 6 Do you recall reading in 7 Dr. Smith's deposition about the Joint 8 Commission prescribing guidelines? 9 A. I -- I'd have to -- you'd have to 10 show it to me in his transcript. I don't 11 recall that specifically. 12 Q. Do you ever remember any 13 presentation done by the Summit County Opioid 14 Task Force that identified the Joint Commission 15 prescribing guidelines as a contributing factor 16 to the opioid epidemic? 17 A. I -- I don't recall that part 18 specifically. No, I do not. 19 Q. Did you ever read the governor's 20 report that we referenced earlier -- or that 21 you referenced earlier in your testimony, from 22 2010? 23 A. I didn't read it page for page. I 24 definitely looked at it and looked at some of 25 the findings and recommendations and sort of</p>

<p style="text-align: right;">Page 378</p> <p>1 focused on who was on it and what roles they 2 played. 3 Q. And I believe you testified 4 earlier, and please correct me if I am 5 misremembering, and I don't have the live feed 6 to double check it. But I believe you 7 testified that because there was a shift in the 8 administration, that the report really was kind 9 of obsolete? 10 A. Yes. 11 - - - - - 12 (Thereupon, Deposition Exhibit 18, 13 10/1/2010 Document Titled "Ohio 14 Prescription Drug Abuse Task Force: 15 Final Report Task Force 16 Recommendations, was marked for 17 purposes of identification.) 18 - - - - - 19 Q. I'm going to hand you what we've 20 marked as Exhibit 18 for identification 21 purposes. Do you recognize Exhibit 18 to be 22 the report, the 2010 report from the Ohio 23 Prescription Drug Abuse Task Force? 24 A. Yes. 25 Q. Is this the report you were</p>	<p style="text-align: right;">Page 380</p> <p>1 oval, I guess, in the middle, and it says, 2 "Epidemic," and then the graphic includes six 3 boxes with arrows pointing in toward the oval 4 that says "Epidemic," right? 5 A. Yes. 6 Q. Above that, the narrative, the 7 title of the narrative section is, "How did 8 this become an epidemic?" 9 Do you see that? 10 A. I do. 11 Q. Had you read this information 12 before today? 13 A. I've looked at this in preparation 14 for the deposition. 15 Q. Is it your understanding -- or 16 strike that. 17 Earlier you said because of the -- 18 the change in the administration, folks didn't 19 really give much weight to this report because 20 the administration changed hands; is that 21 right? 22 A. I wouldn't say folks didn't give it 23 much weight. I -- I don't think it reached a 24 broad audience. You know, I sort of prided 25 myself on being a very informed prosecutor, and</p>
<p style="text-align: right;">Page 379</p> <p>1 referring to earlier in your testimony? 2 A. I think so. It looks a little 3 different. I don't -- I think this was the 4 front page that I had, this sort of yellow. 5 Q. Okay. So the second page of 6 Exhibit 18, at least the copy that we've 7 marked, you recognize that? 8 A. Yes, I do. 9 MS. KEARSE: And, Counsel, I just 10 want to make sure, I mean, this was all in 11 preparation for testimony, so any discussions 12 that we have had, that would be privileged. 13 Q. Before preparing for your 14 deposition, had you seen this document before? 15 A. No. 16 Q. Was this document discussed at any 17 of the opiate task -- the Summit County Opioid 18 Task Force meetings that you attended? 19 A. I don't recall. 20 Q. Directing your attention, please, 21 to page 21 of Exhibit 18. Are you there? 22 A. I am. 23 Q. Page 21 of Exhibit 18 has some text 24 in the middle of the page, and the bottom part 25 of the page is a graphic that has a circle or</p>	<p style="text-align: right;">Page 381</p> <p>1 we were led by a prosecutor who was very 2 connected to -- to the state capitol. And so 3 these were typically things -- I was surprised 4 that I had not seen it, because of her 5 connection. 6 But then when I looked at sort of 7 the timing of when it was released and the, you 8 know, change of guard, it did not surprise me 9 that it had not reached a broader audience. 10 Q. And do you know for a fact that it 11 did not reach a broader audience just because 12 you personally did not know of it? 13 A. Well, as I stated before, I asked 14 multiple people in preparation for this if they 15 had ever seen it, and they had not. 16 Q. Who did you ask who said that they 17 had never seen it? 18 A. Patrick Leonard, Gertrude Wilms, 19 and I believe Brad Gessner testified that he 20 had never seen it. 21 Q. Did you talk with any clinicians 22 like Dr. Smith or any of the other clinicians 23 that -- that you've spoken to, about this? 24 A. No. As I previously stated, I read 25 Dr. Smith's testimony, but I did not have a</p>

<p style="text-align: right;">Page 382</p> <p>1 discussion with him.</p> <p>2 Q. Is it your understanding that -- or</p> <p>3 strike that.</p> <p>4 This document that is dated October</p> <p>5 1, 2010, do you understand this to be publicly</p> <p>6 available?</p> <p>7 MS. KEARSE: Object to form.</p> <p>8 A. Well, it -- it's a public record.</p> <p>9 You'd have to know what you were looking for or</p> <p>10 asking for to get it. I don't know how it was</p> <p>11 disseminated or to whom it was sent, but it --</p> <p>12 it's absolutely a public record.</p> <p>13 Q. This public record from 2010</p> <p>14 includes a discussion of how prescription</p> <p>15 opioids became an epidemic, right?</p> <p>16 A. I see that, uh-huh.</p> <p>17 Q. And it includes a discussion of a</p> <p>18 number of factors, right?</p> <p>19 A. Yes.</p> <p>20 Q. Among those factors, they're listed</p> <p>21 in the graphic, and then also there's a</p> <p>22 narrative that follows in Exhibit 18 about most</p> <p>23 of those factors.</p> <p>24 Among those factors is "changes in</p> <p>25 clinical pain management." Do you see that?</p>	<p style="text-align: right;">Page 384</p> <p>1 "contributing factor," because that has weight.</p> <p>2 It has value.</p> <p>3 The cause of this epidemic in</p> <p>4 Summit County is the opioid industry. The</p> <p>5 changes in clinical pain management, the</p> <p>6 aggressive marketing, those -- these other</p> <p>7 things, those all exacerbate this problem of</p> <p>8 the readily available supply in my community.</p> <p>9 So I -- you know, I didn't write</p> <p>10 this. I -- I don't like -- I won't use the</p> <p>11 term "contributing factor."</p> <p>12 Q. What are the contributing factors</p> <p>13 to the cause of the opioid epidemic?</p> <p>14 A. I -- I don't subscribe anything to</p> <p>15 a contributing factor. There is one cause, and</p> <p>16 there are things, other elements that have</p> <p>17 spread this fire, but the match was lit by the</p> <p>18 industry.</p> <p>19 Q. On what do you -- strike that.</p> <p>20 First, what is the one cause? What</p> <p>21 do you mean by the opioid industry? What does</p> <p>22 that include?</p> <p>23 A. The manufacturers, distributors,</p> <p>24 and pharmacies who dispensed these pills into</p> <p>25 the community.</p>
<p style="text-align: right;">Page 383</p> <p>1 A. I do.</p> <p>2 Q. Do you have any understanding of --</p> <p>3 of what that factor in the contributions to the</p> <p>4 opioid epidemic is?</p> <p>5 A. I'm sorry. Could you rephrase</p> <p>6 that?</p> <p>7 Q. Sure, sure. Do you have any</p> <p>8 understanding of what is meant by changes in</p> <p>9 clinical pain management in this graphic</p> <p>10 depicting contributing factors to the opioid</p> <p>11 epidemic?</p> <p>12 A. I -- if you're asking if changes in</p> <p>13 pain management are the cause of this problem,</p> <p>14 I -- I would tend to disagree that they are the</p> <p>15 cause. They may have exacerbated the problem,</p> <p>16 but they are not necessarily the root cause.</p> <p>17 Q. No, my question was, do you</p> <p>18 understand that to be one of the contributing</p> <p>19 factors? I'm not asking for a determination --</p> <p>20 A. I understand but that that's what</p> <p>21 this report says.</p> <p>22 Q. Do you disagree that changes in</p> <p>23 clinical pain management are a contributing</p> <p>24 factor to the opioid epidemic?</p> <p>25 A. I don't want to use the term</p>	<p style="text-align: right;">Page 385</p> <p>1 Q. And it's your testimony, on behalf</p> <p>2 of Summit County, on the topic of contributing</p> <p>3 factors to the opioid epidemic, that there are</p> <p>4 no other contributing factors; is that right?</p> <p>5 A. No, there are no other -- that is</p> <p>6 the factor. That is the cause.</p> <p>7 These other things that are in</p> <p>8 these, you know, fancy colored boxes or -- or</p> <p>9 things outside of the industry certainly spread</p> <p>10 that fire, but, again, that match was lit with</p> <p>11 one -- with one entity, and that's the</p> <p>12 industry.</p> <p>13 Q. I think you've testified that you</p> <p>14 are not familiar with the Joint Commission on</p> <p>15 the Accreditation of Health Care Organizations,</p> <p>16 right?</p> <p>17 A. I -- I don't believe so. I -- if</p> <p>18 you had a document I could look at, but I don't</p> <p>19 believe so.</p> <p>20 - - - - -</p> <p>21 (Thereupon, Deposition Exhibit 19,</p> <p>22 Document Titled "Joint Commission on</p> <p>23 Accreditation of Healthcare</p> <p>24 Organizations Pain Standards for</p> <p>25 2001," PPLPC019001392359 to</p>

<p style="text-align: right;">Page 386</p> <p>1 019001392374, was marked for 2 purposes of identification.) 3 - - - - - 4 Q. Hand you what we've marked as -- 5 A. Okay. 6 Q. -- Exhibit 19 for identification 7 purposes. 8 Have you ever seen that document 9 before? 10 A. I do not recognize this one. 11 Q. This is publicly available 12 information dated from 2001 on the Joint 13 Commission on Accreditation of Health Care 14 Organization Pain Standards for 2001. 15 Do you see that at the top of the 16 page? 17 A. I do. 18 Q. And you don't have any 19 understanding of the Joint Commission's 20 relationship with health care entities? 21 A. I do not. 22 Q. And you don't recall any testimony 23 in Dr. Smith's deposition regarding the Joint 24 Commission guidelines? 25 A. Not specifically, I don't.</p>	<p style="text-align: right;">Page 388</p> <p>1 Implementation for RI-1" -- or "RI.1.2.8." 2 Do you see that? 3 A. I see that, yes. 4 Q. The first entry underneath that is 5 number one, and it reads, "Pain is considered a 6 fifth vital sign in the hospital's care of 7 patients." 8 Did I read that correctly? 9 A. Yes. 10 Q. Do you know whether the 11 pharmaceutical industry has any relationship to 12 the Joint Commission? 13 A. I -- I don't know. I'm not 14 familiar with the Joint Commission, as I -- as 15 I stated. 16 Q. And do you know whether the Joint 17 Commission made a recommendation, in 2001, to 18 health care providers to consider pain in 19 evaluating patients? 20 A. Did the -- I'm sorry. Could you 21 say that one more time. 22 Q. Reading this document -- 23 MS. FLOWERS: I'm sorry. What page 24 is it? 25 MS. FEINSTEIN: It is RI-14.</p>
<p style="text-align: right;">Page 387</p> <p>1 Q. I'd like to direct your attention 2 to the second page of Exhibit 19. Near the top 3 of the page, you'll see three bullets, and 4 immediately underneath that, it says, 5 "Effective pain management is appropriate for 6 all patients, not just for dying patients," and 7 then paren, "See standards RI.1.2.8." 8 A. I see that. 9 Q. Do you see that? 10 A. I do. 11 Q. Have you ever heard of any medical 12 accrediting agency indicating that pain 13 management is appropriate for all patients? 14 A. I've not heard that, and I 15 certainly wouldn't contend that pain management 16 isn't appropriate for people who are in pain. 17 Q. Continuing on in this document, 18 near the back, you will see examples of -- 19 strike that. 20 Let me try to find a page number 21 for you. At the bottom, there is a page number 22 RI-14. The bottom left. 23 A. Okay. 24 Q. In the middle of the page, there is 25 a -- a section that's titled, "Examples Of</p>	<p style="text-align: right;">Page 389</p> <p>1 THE WITNESS: It's in that corner. 2 MS. FEINSTEIN: Yeah, sorry. 3 There -- there's also a Bates number that is 4 Bates ending 2370. 5 MS. FLOWERS: Thank you. 6 MS. FEINSTEIN: You're welcome. 7 Q. Before reading this today, had you 8 ever heard of the Joint Commission issuing a 9 recommendation that pain be considered a fifth 10 vital sign? 11 A. No. I -- again, to -- to be 12 honest, I don't know that I've -- if I've heard 13 the term or read the term "Joint Commission on 14 Accreditation of Health Care Organizations," 15 it's not something that is common or familiar 16 to me. 17 Q. Do you know whether the prescribing 18 guidelines provided by the Joint Commission to 19 health care facilities had any impact on 20 prescribing practices of physicians? 21 A. I don't know. 22 Q. The other factors that are 23 identified in Exhibit 18 on page 21 that we 24 were looking at, that graphic, have you ever 25 seen a similar graphic to this that's been</p>

<p style="text-align: right;">Page 390</p> <p>1 presented by the Opioid Task Force?</p> <p>2 A. I have.</p> <p>3 Q. Did you discount all of those other</p> <p>4 factors as contributing to the opioid epidemic?</p> <p>5 A. I don't discount them as playing a</p> <p>6 role in exacerbating the epidemic that we had</p> <p>7 in Summit County. I don't use the term</p> <p>8 "contributing cause," because I understand the</p> <p>9 weight that that carries.</p> <p>10 Q. You understand, as -- as a former</p> <p>11 prosecutor, that it's important to have</p> <p>12 evidence to support claims, right?</p> <p>13 A. Yes.</p> <p>14 Q. What evidence, specific evidence</p> <p>15 regarding the marketing of pharmaceuticals does</p> <p>16 Summit County have that -- that the marketing</p> <p>17 of pharmaceuticals caused the opioid epidemic.</p> <p>18 What evidence do you point to?</p> <p>19 MS. KEARSE: Object to form.</p> <p>20 A. I guess -- I'm sorry. I -- what</p> <p>21 evidence do I point to that suggests that the</p> <p>22 marketing of opioids caused the harm?</p> <p>23 Q. Yes.</p> <p>24 A. Is that a question? Okay.</p> <p>25 Throughout the discovery process</p>	<p style="text-align: right;">Page 392</p> <p>1 and the testimony I remember reading from the</p> <p>2 physicians who have testified, they've all</p> <p>3 learned about the addictive nature of opioids.</p> <p>4 But these were being marketed in a different</p> <p>5 way, that they were slow release, that they</p> <p>6 were non-habit forming, that two 12-hour pills</p> <p>7 a day could be long-term relief for pain. And</p> <p>8 that people wouldn't build up a tolerance, that</p> <p>9 the pain would somehow offset this addiction,</p> <p>10 which just simply wasn't true.</p> <p>11 People were no longer taking them</p> <p>12 for pain. They were taking them so that they</p> <p>13 would not become sick.</p> <p>14 Q. Is it -- does Summit County</p> <p>15 acknowledge that the opioid crisis is complex?</p> <p>16 MS. KEARSE: Object to form.</p> <p>17 A. It could be characterized as</p> <p>18 complex. It could absolutely be characterized</p> <p>19 as quite simple: that the marketplace for</p> <p>20 these pills was created by an industry that</p> <p>21 preyed upon people who didn't know any better.</p> <p>22 Q. Is it your testimony, on behalf of</p> <p>23 Summit County, that there are no other</p> <p>24 contributing factors to the opioid crisis?</p> <p>25 A. I am not going to use the word</p>
<p style="text-align: right;">Page 391</p> <p>1 I've learned that the -- some of the marketing</p> <p>2 materials were inaccurate, and --</p> <p>3 Q. And how did that cause the harm?</p> <p>4 A. -- misleading.</p> <p>5 Doctors relied on those materials,</p> <p>6 and patients relied on their doctors. And as a</p> <p>7 person who trusts doctors and trusts</p> <p>8 physicians, in a community like that, where --</p> <p>9 where there is that inherent trust, that --</p> <p>10 that created this epidemic in -- in people that</p> <p>11 would not have come into contact with opioids</p> <p>12 but for taking them at the direction of their</p> <p>13 doctor, who was operating under inaccurate</p> <p>14 information directly from the marketing</p> <p>15 materials.</p> <p>16 There are doctors who certainly,</p> <p>17 had they known the real outcomes that this</p> <p>18 false narrative that these were not going to</p> <p>19 become habit forming and these were not going</p> <p>20 to become harmful, would have suggested other</p> <p>21 ways to treat the pain.</p> <p>22 Q. Is it your testimony that</p> <p>23 physicians were not aware that opioids had a</p> <p>24 risk of addiction?</p> <p>25 A. I think physicians learn, and --</p>	<p style="text-align: right;">Page 393</p> <p>1 "contributing factors." There are other issues</p> <p>2 in our community that have added gasoline to</p> <p>3 the fire, that have exacerbated the problem.</p> <p>4 Q. What are some of those factors?</p> <p>5 A. Most of them occur after the point</p> <p>6 that addiction has already taken hold.</p> <p>7 Q. I'm not asking when. I'm asking</p> <p>8 what are those contributing factors?</p> <p>9 A. But it's important to note the</p> <p>10 timing of them, because, again, not a</p> <p>11 contributing factor, but when you have people</p> <p>12 who go to their doctor and have had an accident</p> <p>13 at work or have had an injury at work, and they</p> <p>14 want to go back to work, they are in a job that</p> <p>15 if they don't work, they don't get paid. They</p> <p>16 don't have paid time off, or they have had a</p> <p>17 fight with BWC that they're not going to win.</p> <p>18 And they have to put food on the table. So</p> <p>19 they do whatever they need to do to feel a</p> <p>20 certain way so that they can go to work.</p> <p>21 So economic driver certainly is a</p> <p>22 part of that. But, again, they aren't getting</p> <p>23 those pills unless there's a doctor who's</p> <p>24 relying on the manufacturer's information</p> <p>25 prescribing those.</p>

<p style="text-align: right;">Page 394</p> <p>1 Q. Do illicit opioids play any role in 2 the opioid crisis?</p> <p>3 A. Illicit meaning through diversion?</p> <p>4 Q. Illicit meaning through diversion, 5 illicit opiates, do those play any role in the 6 opioid crisis?</p> <p>7 A. I mean, diversion certainly plays a 8 role, no question. And illicit, if you mean 9 what we would call street drugs, heroin and 10 fentanyl, certainly.</p> <p>11 But, again, people aren't using 12 heroin out of the gate. This influx of 40 13 million pills per year created an avenue that 14 heroin was able to drive right through, because 15 people couldn't get the pills. And we weren't 16 identifying those folks, because they were 17 still going to work. They were still trying to 18 maintain a regular lifestyle. And when those 19 pills were no longer available, the cheaper and 20 easier way to not get pill sick was to buy 21 heroin.</p> <p>22 Q. And it's your testimony that Summit 23 County could not make any connection between 24 the alleged role of the opioid industry, as 25 you've described it, which includes</p>	<p style="text-align: right;">Page 396</p> <p>1 We did not do those things that you asked 2 about. We went, as a community, inward and did 3 everything we could to save people's lives.</p> <p>4 So I reject the notion that we were 5 sitting around waiting for this to get bad. 6 Everyone in their lane was doing everything 7 they could to address the issue. And when we, 8 the collective we, came to this conclusion, we 9 acted.</p> <p>10 Q. So it's your testimony that prior 11 to that epiphany at the Opioid Task Force 12 meeting in 2014-2015, Summit County had no 13 information available to it to make a 14 connection between its view that the opioid 15 industry created this opioid issue?</p> <p>16 MS. KEARSE: Objection to form, and 17 misstates her testimony.</p> <p>18 A. I stated before, there were red 19 flags. There were upticks in cases. There 20 were new people seeking treatment. There was 21 an increased request for treatment. But it was 22 not until these times when the collective 23 community came together that we identified the 24 root of all of these problems people were 25 facing in their lanes.</p>
<p style="text-align: right;">Page 395</p> <p>1 manufacturers, distributors, and pharmacies, 2 until 2014, despite the fact that you've 3 testified that Summit County had information 4 about a heightened risk of fentanyl in the 5 2000s, that the number of opioid pills 6 available was known to be rather high in 2010 7 and in 2012, and the governor's report that 8 identified -- the governor's opioid task force 9 report that identified pharmaceutical 10 marketing, among other potential factors, 11 contributing to an opioid epidemic that was 12 identified in 2010? It's your testimony that 13 with all that information, Summit County was 14 not aware of any connection between the opioid 15 industry and the opioid problem until 2014; is 16 that right?</p> <p>17 MS. KEARSE: Object -- object to 18 form. Mischaracterizes Ms. Johnson's 19 testimony.</p> <p>20 A. Victim blaming, however carefully 21 crafted or explained, is repugnant to me, and 22 when we identified the root of the crisis in 23 our community, we took action, and we took 24 action in the form of a lawsuit.</p> <p>25 We did not reach out to the FDA.</p>	<p style="text-align: right;">Page 397</p> <p>1 MS. FEINSTEIN: All right. Why 2 don't we take a short break here, and I'll flip 3 through my notes, and I think I'm almost done.</p> <p>4 THE VIDEOGRAPHER: Off the record 5 at 7:10.</p> <p>6 (A recess was taken.)</p> <p>7 THE VIDEOGRAPHER: On the record, 8 7:35.</p> <p>9 BY MS. FEINSTEIN:</p> <p>10 Q. Thank you. Ms. Johnson, I just 11 have a few more questions for you, and then I'm 12 going to pass the mic to one of my colleagues.</p> <p>13 I was asking you some questions 14 that related to Deposition Topics No. 9 and 15 No. 34 as modified by Special Master Cohen, as 16 listed in what we've marked as Exhibit 1. Both 17 of those topics request information from Summit 18 County as a non-expert related to the topics.</p> <p>19 Do you see that?</p> <p>20 A. I do.</p> <p>21 Q. And was the testimony that you were 22 providing to me during the questions that I 23 asked you earlier today, in your capacity as a 24 corporate designee for Summit County as 25 non-expert on those items?</p>

<p style="text-align: right;">Page 398</p> <p>1 A. Yes, I've not been qualified as an 2 expert in these fields. 3 MS. FEINSTEIN: Thank you for your 4 time. I have nothing further. 5 THE WITNESS: Okay. Thank you. 6 EXAMINATION OF GRETA JOHNSON 7 BY MR SCHUTTE: 8 Q. Well, I have to say good evening -- 9 A. Good evening. 10 Q. -- Ms. Johnson. My name is Scott 11 Schutte. I represented Rite Aid, and I have 12 some questions to ask you now on behalf of my 13 client. 14 First of all, let me start with 15 something that you testified about early in the 16 day, which was that you said you were 17 personally affected by the opioid crisis 18 because you lost a friend to overdose? 19 A. Yes. 20 Q. What was his name? 21 A. Alan. 22 Q. What was his last name? 23 A. Eller. 24 Q. How do you spell that? 25 A. E-l-l-e-r.</p>	<p style="text-align: right;">Page 400</p> <p>1 preparing, so intentionally preparing, in 2 addition to my work in this community, I -- 60 3 to 70 hours, probably, between reading the 4 transcripts and -- and reviewing the documents 5 that -- and that's a low estimate, I would 6 guess, but, yeah, I don't... 7 Q. Okay. One of the transcripts you 8 said you reviewed in preparation for the 9 deposition today was Julie Barnes? 10 A. Yes, I did. 11 Q. And can you tell us what Julie 12 Barnes' title is? 13 A. She's the director of the 14 Children's Services Bureau in Summit County. 15 Q. Okay. Do you recall her testimony, 16 Ms. Johnson, that between 25 percent and 33 17 percent of the people that she comes into 18 contact through, through her work are addicted 19 to some drug or other? 20 MS. KEARSE: Object to form. 21 A. I recall -- I recall 30 percent is 22 what sticks in my mind. I recall that there -- 23 that addiction rates were -- were at around 30 24 percent in some way, shape, or form. 25 Q. But did you understand her</p>
<p style="text-align: right;">Page 399</p> <p>1 Q. And you said that you knew him 2 from -- from college and knew him well? 3 A. I knew him well in college, yes. 4 Q. And at the time of his passing, you 5 had not had contact with him in recent times? 6 A. Correct. 7 Q. And the information you testified 8 to about his -- the fact that he had been using 9 prescription opioids while in college and had 10 become eventually a heroin user was information 11 that you heard from other folks that you knew 12 at college? 13 A. Yes. 14 Q. Where -- where did he live when he 15 passed, if you know? 16 A. It was not in Summit County. 17 Q. Okay. How much time did you 18 prepare -- spend preparing for your deposition 19 today? 20 MS. KEARSE: Objection. Asked and 21 answered. 22 A. As I looked at what I had done to 23 prepare, it's somewhere between 30 and 35 hours 24 that I've spent with the attorneys on the case. 25 And then I would estimate specifically</p>	<p style="text-align: right;">Page 401</p> <p>1 testimony to be that there is a certain segment 2 of the population with which she interacts that 3 was going to be addicted to some drug at any 4 given time, and it moved depending on available 5 and perception of safety between 6 methamphetamines, cocaine, heroin, alcohol, 7 marijuana? 8 MS. KEARSE: I'm going -- I'm going 9 to object to the form, and if you want show her 10 the testimony, you're free to show her the 11 testimony. 12 A. I -- the first part of your 13 question was does she come into contact with 14 folks who are abusing and -- and are those the 15 drugs? 16 Q. Let me start over. 17 Do you recall the portion of her 18 testimony where she testified that -- that the 19 population she's in contact with, she estimated 20 that any given time, 25 percent to 33 percent 21 are addicted to some drug or another, 22 irrespective of what drug is -- let me -- let 23 me strike that and start over. 24 She testified that 25 to 33 percent 25 of the people she comes into contact with are</p>

<p style="text-align: right;">Page 402</p> <p>1 addicts of one drug or another, and the type of 2 drug rotates among things like marijuana, 3 alcohol, meth, cocaine and opioids; do you 4 recall that?</p> <p>5 MS. KEARSE: I'm going to object to 6 the form of the question, and direct, if you 7 want to show her testimony, you're free to do 8 that.</p> <p>9 A. I -- I --</p> <p>10 MS. KEARSE: Mischaracterizes it.</p> <p>11 A. Yeah, I don't recall in -- I guess 12 in my mind I recall there being 30 percent 13 being a percentage that I felt like was 14 attributable to the increase in placement due 15 to opioids. I'd ask to see that. I can 16 certainly comment on it. If you have it, I'd 17 be glad to look at it.</p> <p>18 Q. Do you believe that Julie Barnes 19 has expertise in -- in dealing with a 20 population that is addicted to opioids?</p> <p>21 MS. KEARSE: Object to form.</p> <p>22 A. She's an expert in Children's 23 Services, and as a result of the opioid crisis 24 has had to educate herself and her staff on 25 interacting with people who are addicted and</p>	<p style="text-align: right;">Page 404</p> <p>1 individuals start with opioids.</p> <p>2 Q. I'll come back to that in a second, 3 but I want to stick with your testimony that 4 people are not using heroin out the gate.</p> <p>5 A. Yeah, addiction is a progressive 6 disease, and there's still a real -- even 7 addicts, there is a level that people feel like 8 once you put a needle in your arm, everything 9 changes, so that -- that's still a pervasive 10 thought in the community, even in the addiction 11 community and the population affected by 12 addiction.</p> <p>13 So with addiction being such a 14 progressive illness, it would be incredibly 15 uncommon -- and this is something that I talked 16 with Donna Abbot about -- or, I'm sorry, Donna 17 Skoda about -- about the ways in which people 18 transition through different drugs.</p> <p>19 Q. Okay. Let me -- let me try this 20 again. My question is not about people 21 transitioning through drugs. My question is 22 about your testimony that people are not using 23 heroin out of the gate.</p> <p>24 And what I'm trying to understand 25 and trying to have you testify to the ladies</p>
<p style="text-align: right;">Page 403</p> <p>1 the cadre of issues that come along with that.</p> <p>2 I don't think Julie Barnes set out 3 to be an opioid addiction expert. She -- as 4 the director of Children's Services, she's been 5 forced into a role of having to become far more 6 knowledgeable than she originally was.</p> <p>7 Q. You testified, just before the last 8 break -- and I didn't have a live feed so I 9 hope I have this correct -- that, quote, 10 "People are not using heroin out of the gate," 11 close quote.</p> <p>12 Is that correct?</p> <p>13 A. That's correct.</p> <p>14 Q. Is it -- so it is your testimony, 15 as a corporate representative for Summit 16 County, that not a single person in Summit 17 County becomes addicted to heroin without first 18 using a prescription opioid?</p> <p>19 A. No, not without first using a 20 prescription opioid. Certainly there are, I'm 21 sure, some addicts who transitioned from other 22 drugs. But by and large, the heroin epidemic 23 that came sort of as the -- the tail of the 24 fireball of the opioid epidemic, the numbers 25 consistently show that 80 percent of those</p>	<p style="text-align: right;">Page 405</p> <p>1 and gentlemen of the jury about is whether 2 there's a single person in Summit County since, 3 let's say, 2006, who started using drugs by 4 using heroin and had not used a prescription 5 opioid before that?</p> <p>6 A. I don't know the answer to that.</p> <p>7 Q. There could be -- there could be 8 one person, certainly, right?</p> <p>9 A. Perhaps.</p> <p>10 Q. There could be thousands of those 11 people?</p> <p>12 MS. KEARSE: Object to form.</p> <p>13 A. I wouldn't agree to that.</p> <p>14 Q. How do you know?</p> <p>15 A. Because I've been in this community 16 for the last 20 years and I've been at the 17 Opiate Task Force meetings where we have people 18 come in who are not only in active recovery, 19 but who provide the treatment. And 20 overwhelmingly -- 80 percent to me seems low, 21 because overwhelmingly these folks started with 22 prescription pain pills.</p> <p>23 The 20 percent that gets us to the 24 hundred, those are just unknowns or unreported, 25 people who either didn't want to tell or</p>

Page 406

1 perhaps they did start with something else.
 2 But at least 80 percent started with opioid
 3 pain pills.
 4 Q. Okay. So we can agree, can't we,
 5 that possibly as many as 20 percent of folks
 6 who are using heroin started with heroin and
 7 did not start with prescription opioids?
 8 MS. KEARSE: Object to form.
 9 Misstates her char- -- her testimony.
 10 A. We could agree to that, but we
 11 could also get to 100 percent, because I
 12 believe that 20 percent to be unknown.
 13 Q. We can't get to 100 percent,
 14 because you already told me you'll agree that
 15 not every -- there's at least one person who
 16 started with heroin, not prescription opioids?
 17 A. I said there could be, not that
 18 there was. I'm not aware of anyone who I've
 19 come into contact with who started with heroin.
 20 Q. Okay. But I'm not asking about
 21 your personal knowledge, ma'am. I'm talking
 22 about you as a corporate representative of
 23 Summit County, okay?
 24 A. Yes. And when I discussed this
 25 with the public health director, she agreed

Page 407

1 that this is not an illness where people use
 2 heroin, using my terms, out of the gate. That
 3 this is something that progresses to people
 4 finding themselves so desperate to not become
 5 ill, that they will -- they will find heroin on
 6 the street.
 7 Q. And the public health director is
 8 Donna Skoda?
 9 A. Yes.
 10 Q. Do you believe she's good at her
 11 job?
 12 A. I do.
 13 Q. Do you believe she's knowledgeable?
 14 A. I do.
 15 Q. Do you believe she has expertise?
 16 A. I do.
 17 Q. This 80 percent number, as I
 18 understood your testimony, it comes from a
 19 study that you reviewed?
 20 A. Yes, from the American Medical
 21 Journal, I believe was what it was from.
 22 Q. All right. When was it published?
 23 A. 2013, and then, as I previously
 24 stated as well, that number is discussed by the
 25 public health officials in Summit County, by

Page 408

1 the law enforcement officials, by the ADM Board
 2 officials. That is general knowledge in Summit
 3 County that 80 percent of these folks are
 4 starting with opioid pills.
 5 Q. You were a prosecutor for how many
 6 years?
 7 A. Approximately 10. Just over 10.
 8 Q. You tried cases in front of juries?
 9 A. I did.
 10 Q. You understand that -- I -- well,
 11 let's strike that.
 12 I assume that when you were a
 13 prosecutor, if the defense was tendering an
 14 argument that it's generally understood in the
 15 community I didn't commit a crime, that that
 16 probably wouldn't be evidence that you would
 17 allow in without objection, correct?
 18 MS. KEARSE: Object to form.
 19 A. I would also say that there were
 20 plenty of times that evidence was "Everybody in
 21 the neighborhood knew," and we relied on that
 22 all the time.
 23 Q. Could you give me an example?
 24 A. Sure. "Everybody in the
 25 neighborhood knew that the after-party was at

Page 409

1 490 Allen Street." "Everybody knew that even
 2 though the bar was supposed to close at
 3 a.m., it stayed open until 4:00."
 4 Q. But you -- you'd establish that
 5 through testimony?
 6 A. Correct.
 7 Q. People who -- people who actually
 8 testified and had firsthand knowledge that the
 9 bar was open after 2:00?
 10 A. Sure.
 11 Q. Or people who testified, based on
 12 personal knowledge, that -- what was the thing?
 13 490? What was the reference?
 14 A. That -- that an after-party was
 15 always at this particular house.
 16 Q. Okay. For the ladies and gentlemen
 17 of the jury, I understand now that you pointed
 18 to an article that you said was published in
 19 2013 --
 20 A. I believe.
 21 Q. -- in the Amer- -- in the AMA
 22 Journal, and I understand we can -- we can dig
 23 that up and look at that.
 24 But with respect to all those other
 25 folks that you said you heard this 80 percent

<p style="text-align: right;">Page 410</p> <p>1 number from, do any of them have personal 2 knowledge about the percentage of people who 3 started as a prescription opiate -- opioid user 4 and then became a heroin addict? 5 A. Yes. That information is presented 6 at the Opiate Task Force meetings and has been 7 presented at the Opiate Task Force meetings 8 from treatment providers, and also from law 9 enforcement officials who come into contact 10 with folks every day who, you know, are 11 arrested. 12 The -- the number of individuals 13 who go through our drug courts, I've heard our 14 drug court judges talk about the overwhelming 15 majority of individuals who are using heroin 16 started with opioids. 17 So I don't -- there are -- the data 18 dashboards are out there for the ADM and the 19 public health. But I -- I have lived among 20 these people, and I have heard their, not sworn 21 testimony in front of a jury, but this is what 22 they do. It is the lane in which they live 23 every day. The drug court judges, the director 24 of ADM, the public health commissioner, these 25 are folks who do this work every day, and they</p>	<p style="text-align: right;">Page 412</p> <p>1 You know, you've said I'm an 2 attorney. Everybody's pointing out that I'm an 3 attorney. I'm a mother. And when a mother 4 looks at you and tells you what killed her 5 child, that has weight also. 6 Q. Ma'am, can we -- we have limited 7 time, and I understand that you feel 8 passionately about this, but I'm not talking 9 about that. I'm talking about this number, 10 this 8 out of 10 or 80 percent number that 11 you've talked about all day long. Let me make 12 sure I understand it. 13 That's based on one study that 14 you've seen, and it's based on talking to folks 15 who estimate that in their experience, that 16 that's what they've seen, that 80 percent of 17 folks who are addicted to heroin started using 18 prescription opioids? 19 MS. KEARSE: Object to form, and 20 argumentative. 21 A. I stand by 80 percent. 22 Q. Okay. But my question is, do I 23 have the bases for that testimony correct? 24 It's one article plus folks you've talked to? 25 MS. KEARSE: Object to form. That</p>
<p style="text-align: right;">Page 411</p> <p>1 all agree on this number as well. 2 Q. They all say 80 percent? 3 A. Yes. Absolutely. 4 Q. Do any of them say 75 percent? 5 A. I've heard 85 percent. I've heard 6 it higher. But 80 percent is -- is where it 7 almost always lands, is that 80. 8 Q. And that's anecdotal, though? 9 MS. KEARSE: Object to form. 10 Q. It's not based -- it's not based on 11 any kind of scientific study or any survey; 12 it's based on what these folks you claim have 13 heard out on the street or seen out on the 14 street? 15 MS. KEARSE: Object to form. 16 A. Well, it's not what I'm claiming. 17 It's what I've heard them say. It's also my 18 own experiences, being the representative, of 19 what people say in these meetings, of what 20 these folks who are in the throes of addiction 21 are saying. It's what the family members of 22 the people who are on the list that Dr. Kohler 23 provided, it's what their families say. 24 And we can get into, "Well, but you 25 weren't there and you didn't see them."</p>	<p style="text-align: right;">Page 413</p> <p>1 misstates her char- -- her testimony. 2 A. Folks I've talked to? I know it's 3 late, and I'm trying not to be argumentative as 4 well. But it's insulting to say "folks I've 5 talked to" like I'm just -- this is so 6 pervasive. And -- and you can be irritated 7 that it's your time, but this is so pervasive 8 and it is so clear that opioids are the driving 9 factor in the crisis that we are in, that it's 10 not -- I'm not saying this off the cuff or 11 being flippant about what I have heard and what 12 I've experienced. 13 So you can characterize it as folks 14 I've talked to. I will characterize it as the 15 work I've done in this community for the better 16 part of 15 years, my experience as a 17 prosecutor, as a legislator, and now as a 18 representative of the County, that I stand 19 beside the 80 percent. 20 Q. Okay. And, ma'am, I'm -- again, 21 I'm trying to get an answer to my question. 22 I'm not trying to irritate you. You're using a 23 very specific number. I want to make sure that 24 we understand -- we understand, going forward, 25 because I'm not going to get a chance to talk</p>

<p style="text-align: right;">Page 414</p> <p>1 to you again before you perhaps testify in 2 front of a jury.</p> <p>3 The question I'm asking, it's a yes 4 or no, which is -- are -- other than this one 5 study, the name of which you don't recall, and 6 people that you've talked about -- actually 7 three sources: the study, the people that 8 you've talked to, and your own experience, 9 those are the bases of your testimony that 80 10 percent of heroin users started as prescription 11 opioid users?</p> <p>12 MS. KEARSE: All right. Again, I'm 13 going to object to the repetitive questioning. 14 She's asked and answered this. She's also 15 asked these questions earlier this morning 16 during her testimony as well. Asked and 17 answered.</p> <p>18 A. The American Medical Association 19 Journal that I've talked about, I believe has 20 been produced as part of the discovery process, 21 or certainly presented to me.</p> <p>22 The people I've talked to, as you 23 characterize it, are professionals in our 24 community who do have resources where they are 25 in-taking clients and asking clients how they</p>	<p style="text-align: right;">Page 416</p> <p>1 industry," close quote; is that right?</p> <p>2 A. No. I believe I said the 3 marketing, the promotion, the distribution, and 4 the filling of those prescriptions. That -- 5 that the industry was the cause. It wasn't 6 just marketing.</p> <p>7 Q. Okay. You understand that I 8 represent Rite Aid, correct? I've represented 9 that to you?</p> <p>10 A. You said that, yes.</p> <p>11 Q. Yes. And you understand that Rite 12 Aid, Walmart, Walgreens, and CVS have all been 13 sued, and we refer to them among the group as 14 the Retail Pharmacy Defendants?</p> <p>15 A. Yes, I'm aware of that.</p> <p>16 Q. Okay. What is your understanding 17 as to what the complaint alleges that the 18 Retail Pharmacy Defendants did wrong?</p> <p>19 A. They were an arm of the industry, 20 and when these increased orders were being 21 filled, these suspicious orders, there -- there 22 was a duty to investigate these and whether or 23 not they should have been filled, and that duty 24 was breached.</p> <p>25 Q. What suspicious orders are you</p>
<p style="text-align: right;">Page 415</p> <p>1 became addicted. So there is some basis for 2 the representations they're making.</p> <p>3 So the people I've spoken to, my 4 personal experience with these folks, and the 5 article I've read, that is what has informed my 6 answer.</p> <p>7 Q. Okay. Can I ask you to take a look 8 at Exhibit 1. And specifically that last 9 Exhibit B, which is the modification of certain 10 topics by the Judge.</p> <p>11 A. Yes.</p> <p>12 Q. I want to ask you about Topic 34. 13 I know Ms. Feinstein has asked you some 14 questions about that.</p> <p>15 You testified as a non-expert 16 that --</p> <p>17 MR. SCHUTTE: Excuse me?</p> <p>18 MS. KEARSE: Which -- what topic 19 are you talking about?</p> <p>20 MR. SCHUTTE: 34.</p> <p>21 MS. KEARSE: 34.</p> <p>22 Q. You testified, as a non-expert, 23 that the only cause of the opioid crisis in 24 Summit County was the marketing of 25 pharmaceuticals by, quote, "the pharma</p>	<p style="text-align: right;">Page 417</p> <p>1 referring to?</p> <p>2 A. The orders that have been 3 identified as being higher -- I don't know how 4 to really scientifically explain it or other 5 than the order that comes in is -- is higher at 6 a certain level than the last order from the 7 pharmacy, and that I don't know if it was the 8 special magistrate or the Judge that did the 9 little graph in the order about suspicious 10 order and was -- was it looked into or 11 investigated and -- and what should have 12 happened from then.</p> <p>13 And it's my understanding that 14 those -- those things were not occurring, and 15 that's why the retail pharmacy chains were 16 include in the Defendants.</p> <p>17 Q. What is the basis of your 18 understanding?</p> <p>19 A. I'm sorry. I don't understand what 20 you're asking.</p> <p>21 Q. You just testified that it was your 22 understanding that the Retail Pharmacy 23 Defendants were not properly reviewing the size 24 of shipments. And I'm paraphrasing.</p> <p>25 A. Yes.</p>

<p style="text-align: right;">Page 418</p> <p>1 Q. What's the basis of that 2 understanding?</p> <p>3 A. My conversation --</p> <p>4 MS. KEARSE: Object to form.</p> <p>5 A. My conversations with my counsel.</p> <p>6 Q. Anything else besides your 7 conversation with counsel?</p> <p>8 A. Well, looking at the complaint.</p> <p>9 Q. Besides looking at the complaint 10 and conversations with counsel, any other 11 factual basis for that -- for that assertion?</p> <p>12 A. No. I -- I don't think I can 13 answer that any better.</p> <p>14 Q. Okay. Okay. You -- Ms. Feinstein 15 asked you some questions about contributing 16 factors, and that was a term that you were not 17 comfortable with. Am I correct in hearing the 18 testimony that way?</p> <p>19 A. That's correct.</p> <p>20 Q. All right. Topic 34 asked you 21 to -- about the identification of entities and 22 individuals other than Defendants who you, as a 23 non-expert, believe caused -- and we've covered 24 that. And now I wanted to focus on "and/or 25 contributed to the opioid crisis."</p>	<p style="text-align: right;">Page 420</p> <p>1 Ms. Johnson is answering the question as she 2 sees fit as the corporate representative for 3 Summit County.</p> <p>4 Q. You're not answering the question 5 at all, are you? You're telling me that you're 6 not comfortable using the term "contributed" 7 because it has legal meaning, and therefore, as 8 the corporate representative of Summit County, 9 you are not answering that portion of the 10 question?</p> <p>11 MS. KEARSE: Misstates her 12 testimony.</p> <p>13 A. It does misstate my testimony, 14 because I'm not saying that there isn't a 15 cause. There is a cause. It is also a valid 16 answer to say there aren't any other causes, 17 that the -- the primary and only cause that I 18 believe put us in this position was the 19 industry.</p> <p>20 As I've stated, there certainly are 21 other issues and other factors that have, 22 again, put gasoline on this fire. But I will 23 not -- I will not use the word "contributed" or 24 I can't remember the word Ms. Feinstein used, 25 but -- because I understand --</p>
<p style="text-align: right;">Page 419</p> <p>1 Okay. What -- can you please 2 identify for us, as a corporate representative 3 of Summit County, the entities and individuals, 4 other than Defendants, who contributed to the 5 opioid crisis?</p> <p>6 MS. KEARSE: Object to form.</p> <p>7 A. Again, I'm -- I'm going to give the 8 same answer I gave your co-counsel. I'm not 9 going to use the words "contributed" or -- 10 those words have legal value.</p> <p>11 The cause of this problem is the 12 opioid industry. There have been exacerbating 13 factors that have come along that have 14 increased, certainly, the carnage. But the 15 cause of this continues to be the industry.</p> <p>16 Q. So you will not comply with the 17 Judge's order that you, as the corporate 18 representative for Summit County as to Topic 19 34, will not identify entities and individuals, 20 other than the Defendants, who contributed to 21 the opioid crisis?</p> <p>22 MS. KEARSE: And, Counsel, I'm 23 going to set an objection. Topic 34 asks that 24 as a non-expert believe caused and/or 25 contributed to the opioid crisis. So she's --</p>	<p style="text-align: right;">Page 421</p> <p>1 Q. I don't -- I don't want to talk 2 about gasoline or fires. What I want to talk 3 about is the Judge's order that modified Topic 4 34 --</p> <p>5 A. Uh-huh.</p> <p>6 Q. -- a topic that you're here to 7 testify about today --</p> <p>8 A. Yes.</p> <p>9 Q. -- and the Judge said we are 10 allowed to have a corporate representative who 11 test- -- who was to testify as to the 12 identification of entities and individuals, 13 other than the Defendants, whom you, as a 14 non-expert believe -- let's strike "cause," 15 because we've already dealt with cause --</p> <p>16 A. Sure.</p> <p>17 Q. -- believe contributed to the 18 opioid crisis. Are you going to answer that 19 question or not?</p> <p>20 MS. FLOWERS: Objection. 21 Argumentative.</p> <p>22 MS. KEARSE: Yeah, it's very 23 argumentative. And -- and the specific No. 34, 24 "believe caused and/or contributed to the 25 opioid crisis." And she's doing everything she</p>

<p style="text-align: right;">Page 422</p> <p>1 can in the last eight hours to answer all 2 questions that counsel have asked her, and 3 she's been asked these specific questions 4 already and covered this ground. But if you 5 want to keep asking her and beat a dead horse, 6 go ahead. 7 Q. I want an answer to my question. 8 Are you going to provide us with 9 the corporate representative testimony that a 10 Judge said we were entitled to, which is the 11 identification of entities and individuals, 12 other than Defendants, who you, as a 13 non-expert, believed contributed to the opioid 14 crisis? 15 A. I believe I have done that. 16 Q. You have -- and -- and you've done 17 that by saying that there's not any entity that 18 you can identify that contributed to the opioid 19 crisis? 20 MS. FLOWERS: Misstates her 21 testimony. 22 A. I -- I was speaking with your 23 co-counsel about that inherent desire for 24 people to be able to get back to work, 25 certainly drove more folks back to doctors'</p>	<p style="text-align: right;">Page 424</p> <p>1 A. Yes. 2 Q. -- on Topic 34. And that topic is 3 identification of entities and individuals, 4 other than Defendants, whom you, as a 5 non-expert, believed caused and/or contributed 6 to the opioid crisis. We've covered "caused." 7 Is your -- is your position, ma'am, 8 as you sit here today that you will not testify 9 about any entity or individual who contributed 10 to the opioid crisis? 11 MS. KEARSE: I'm going to -- 12 Counsel, I think you're misstating her 13 testimony. She is doing everything that she 14 can to answer the questions that are posed to 15 her. With that, you're being very 16 argumentative to her. Ms. Johnson has 17 testified to various what she calls factors 18 that have been involved and is using other 19 terminology. 20 But it's "caused and/or 21 contributed" on there, too. She's answering 22 the question as she deems appropriate as the 23 corporate rep for Summit County. 24 Q. The Judge used the term 25 "contributed."</p>
<p style="text-align: right;">Page 423</p> <p>1 offices. 2 Q. So that contributed? 3 A. I'm not going to use the word 4 "contributed." I'm going to say that that 5 exacerbated the problem. People wouldn't have 6 gone back to the doctor if the doctor hadn't 7 already given them a prescription that was -- 8 relied upon bad information, was relied upon by 9 the Defendants saying that you could taper 10 opioids, that they were not going to be 11 addictive. 12 So that original prescription is 13 already tainted, is already a part of a bad 14 chain. 15 Q. Okay. Can we -- can we take this 16 one piece at a time, because I'd really like 17 to -- we've got -- I've got some stuff to 18 cover, and I know you want to get out of here, 19 as we do as well. Let's just take -- 20 A. I've got all the time in the world. 21 Q. Let me take it one piece at a time. 22 The Judge rewrote one of our topics 23 and the Judge said that we were allowed to get 24 testimony from a corporate representative of 25 Summit County -- that's you, correct?</p>	<p style="text-align: right;">Page 425</p> <p>1 Are there any fact- -- are there 2 any entities and individuals, other than 3 Defendants, who contributed to the opioid 4 crisis, yes or no? 5 MS. FLOWERS: Objection. 6 A. It's not that -- it's not that I am 7 refusing to answer. It's that you don't like 8 the answer I'm giving, which is "none." 9 Q. So the answer is that no other 10 entity other than, or individual other than 11 Defendants, contributed to the opioid crisis? 12 A. Because of the legal value of the 13 "contributed," it's none. 14 Q. What's the legal value of the word 15 "contributed"? 16 A. Contributing causes, intervening 17 factors, things like that have value in this 18 process. And a non-expert wouldn't know that. 19 Certainly somebody who came in here 20 and testified who was not a lawyer, perhaps 21 would talk about some of the factors that I 22 have discussed as contributing. But I 23 understand the value of that word, and so I'm 24 choosing other words. 25 Q. You think the Judge understands the</p>

<p style="text-align: right;">Page 426</p> <p>1 value of that word?</p> <p>2 MS. FLOWERS: Objection.</p> <p>3 A. I'm sure the Judge understands the</p> <p>4 value of the word. I'm also unsure of whether</p> <p>5 the Judge knew there would be an attorney</p> <p>6 sitting in the seat as the designated 30(b)(6).</p> <p>7 Q. The Judge understood the value of</p> <p>8 the word "contributed," he specifically</p> <p>9 approved of having a corporate representative</p> <p>10 on that topic, and you're refusing to testify</p> <p>11 using the word "contributed"?</p> <p>12 MS. KEARSE: You --</p> <p>13 MS. FLOWERS: Objection. That is</p> <p>14 not what she's doing. It's time to move on,</p> <p>15 Counsel. That's quite enough.</p> <p>16 MR. SCHUTTE: One lawyer. Either</p> <p>17 one. Pick your shot. One at a time.</p> <p>18 MS. FLOWERS: You know what,</p> <p>19 listen.</p> <p>20 MR. SCHUTTE: Well, let's go --</p> <p>21 MS. FLOWERS: You are beating up on</p> <p>22 this witness. It's time to move on.</p> <p>23 Q. You can go ahead and answer the</p> <p>24 question.</p> <p>25 A. And I'll say it again. I'm not</p>	<p style="text-align: right;">Page 428</p> <p>1 reviewed this.</p> <p>2 Q. And in this section of Exhibit 2,</p> <p>3 Captain Baker is writing about pharmaceuticals.</p> <p>4 That's back on page 62. We looked at that this</p> <p>5 morning with Ms. Winner.</p> <p>6 A. Yes, we did.</p> <p>7 Q. And he said, back in 2005, that the</p> <p>8 level of threat from pharmaceuticals was,</p> <p>9 quote, very high.</p> <p>10 A. Correct.</p> <p>11 Q. Over on page 64, he talked about --</p> <p>12 he has a section called "Distribution," and he</p> <p>13 wrote that, "Distribution of diverted</p> <p>14 pharmaceuticals in Summit County is primarily</p> <p>15 through the individuals involved in the</p> <p>16 diversion or theft of the drugs.</p> <p>17 Pharmaceuticals are diverted in several ways,"</p> <p>18 and then he goes on to list one, two, three,</p> <p>19 four of those.</p> <p>20 One of them is unscrupulous</p> <p>21 physicians. Do you see that?</p> <p>22 A. Yes, I do.</p> <p>23 Q. Are unscrupulous physicians</p> <p>24 individuals who contributed to the opioid</p> <p>25 crisis?</p>
<p style="text-align: right;">Page 427</p> <p>1 refusing to answer the question. You just</p> <p>2 don't like my answer. The answer is none.</p> <p>3 Q. The answer is no one contributed?</p> <p>4 A. Correct.</p> <p>5 Q. Okay. We have Exhibit 2 in front</p> <p>6 of us, if you could put that in front of you.</p> <p>7 Let's see. You talked about this earlier</p> <p>8 today. This is Captain Baker's drug threat</p> <p>9 assessment from Exhibit -- excuse me, from</p> <p>10 2005.</p> <p>11 A. Yes.</p> <p>12 Q. If I could ask you to turn to</p> <p>13 page 60- --</p> <p>14 MS. KEARSE: Can you -- can -- let</p> <p>15 me -- what -- what exhibit number?</p> <p>16 MR. SCHUTTE: Two.</p> <p>17 MS. KEARSE: Okay, just they're</p> <p>18 buried in the exhibits, so.</p> <p>19 Do you have Exhibit 2?</p> <p>20 I'm sorry, Counsel. What page?</p> <p>21 MR. SCHUTTE: It's 64.</p> <p>22 Q. In that -- 64, Captain Baker is --</p> <p>23 and this is a document that you looked at in</p> <p>24 preparation for your deposition today, correct?</p> <p>25 A. I bel- -- yes, I believe I've</p>	<p style="text-align: right;">Page 429</p> <p>1 MS. KEARSE: Object to form.</p> <p>2 A. Unscrupulous physicians played a</p> <p>3 role in this certainly.</p> <p>4 Q. Did they contribute to the opioid</p> <p>5 crisis?</p> <p>6 MS. KEARSE: Object to form.</p> <p>7 A. They played a role. They played a</p> <p>8 significant role in this.</p> <p>9 Q. Did people who imported illegal</p> <p>10 heroin into Summit County play -- excuse me,</p> <p>11 contribute to the opiate crisis?</p> <p>12 A. They played a role.</p> <p>13 Q. Did they contribute?</p> <p>14 A. I'm not going to characterize it</p> <p>15 using the word "contribute."</p> <p>16 Q. You're not going to use the word</p> <p>17 that the Judge put in the topic that he</p> <p>18 rewrote?</p> <p>19 A. No.</p> <p>20 MS. KEARSE: Counsel, you're</p> <p>21 badgering the witness. She's answering your</p> <p>22 questions. There's nothing in the rule --</p> <p>23 Q. Were people who --</p> <p>24 MS. KEARSE: -- that says she has</p> <p>25 to use that word, okay? She's answering your</p>

Page 430

1 questions the best she can, okay? So move on,
2 please.

3 MR. SCHUTTE: Ma'am, let me -- let
4 me engage you on that point for just a second.
5 Are you seriously taking the position that when
6 the Judge rewrote the topic and the Judge not
7 only approved but used the word "contributed,"
8 you're saying that I am somehow
9 mischaracterizing this?

10 MS. KEARSE: What I'm saying is if
11 Ms. Johnson wants to say it was -- it -- her
12 testimony was it was a -- played a role, she
13 does not have to use the word "contribute" in
14 her answers. She's answering your questions.

15 Q. Did pill mills, Ms. Johnson,
16 contribute to the opioid crisis in Summit
17 County?

18 MS. KEARSE: Object to form.

19 A. Pill mills played a role in the
20 opioid crisis.

21 Q. Ms. Feinstein -- you testified
22 earlier today that a key point with respect to
23 the opioid crisis is when pain management was
24 identified as a fifth vital sign.

25 A. Yes.

Page 431

1 Q. Okay. When was pain management
2 identified as a fifth vital sign?

3 A. It was in the -- I believe in the
4 late '90s. I think it was originally
5 introduced, and then I think the pain manage --
6 or the Pain Association pressed for this, which
7 Ms. Feinstein's client is on the board of that.
8 So I believe it was in the late '90s. I
9 believe we reviewed -- it's in the complaint.
10 I believe I reviewed that part in the
11 complaint, that it was the American Pain
12 Association pushed for that.

13 Q. And your understanding was that was
14 late 1990s?

15 A. I -- that's -- yes, that's my
16 recollection.

17 Q. You testified several times today
18 about -- and this was in connection with -- I
19 won't ask you about the criteria -- about
20 the -- the interrogatory responses, and you
21 said that Summit County was not seeking to
22 recover based on individual incidents, but
23 rather on the aggregate of the harm.

24 Can you explain what you meant when
25 you used that term several times today?

Page 432

1 A. That this isn't a personal injury
2 case. This is not one individual coming
3 forward and trying to address their grievances
4 with the industry.

5 This is the collective pain. This
6 is the collective harm that all of these
7 individuals make up that has impacted our
8 community, both financially, emotionally, in
9 every way. The tax of the resources, the loss
10 of human capital. All of these things
11 aggregate into this sort of enormous harm
12 that -- and that's how -- that's how I have
13 prepared.

14 I have not looked at these
15 individuals, although I know them and I know
16 their stories. But it is all of these people
17 in these spreadsheets who make up a part of the
18 aggregate harm that I'm here to talk about.

19 Q. Is ag- -- excuse me. Is aggregate
20 harm your term, or did someone else come up
21 with that?

22 MS. KEARSE: Object to form.

23 A. "Aggregate" is a word I use a lot,
24 I feel like. That -- I -- that wasn't put to
25 me, that -- that's a word that I would use,

Page 433

1 yes.

2 Q. Aggregate harm was -- was the --
3 the use of -- your use of the term aggregate
4 harm was something that you came up with, and
5 that's how you personally view the theory of
6 Summit County?

7 A. Yes. I have said aggregate harm,
8 and I believe the community impact, those are
9 words that I have used in the past.

10 Q. Can I ask you to take -- you still
11 have Exhibit 1 in front of you, or maybe I
12 could put it in front of you. And, again, I
13 would ask you to turn to Exhibit B, which is
14 the rewrite of the topics that was approved by
15 the Judge. And specifically, No. 30.

16 Number 30, you're here as a
17 corporate representative, are you not,
18 Ms. Johnson, to talk about, quote, "What
19 efforts, if any, Plaintiffs made to influence
20 the DEA's quota setting process and what
21 actions, if any, Plaintiffs took in response to
22 the DEA's setting of quotas."

23 You are here to testify about that
24 topic?

25 A. I am.

<p style="text-align: right;">Page 434</p> <p>1 Q. Okay. Let's start with the efforts 2 that Summit County made to influence the DEA's 3 quota setting process. 4 Did Summit County make any such 5 efforts? 6 A. No. 7 Q. Okay. What actions did Summit 8 County take in response to the DEA's setting of 9 quotas? 10 A. I don't know that there were any 11 actions. I certainly had conversations with 12 the detectives who are in the diversion units 13 as DEA task force officers, and I asked them 14 these same questions, to make sure I understood 15 if they had had any impact, and -- and their 16 answer was, no, that there was no influence 17 that was tried to be exerted on the setting of 18 quotas on Summit County's behalf. 19 Q. Okay. And these conversations took 20 place in the course of preparing for your 21 deposition? 22 A. Correct. 23 Q. In these conversations, did you ask 24 whether Plaintiffs took any actions in response 25 to the -- excuse me. In your conversations,</p>	<p style="text-align: right;">Page 436</p> <p>1 one, but it was right in that, you know, three- 2 to five-month time frame, yes. But I remember, 3 yes, the person standing up and saying that, 4 yes. 5 Q. Well -- well, let me see if I can 6 tighten that up a bit, because earlier today 7 you talked about December of 2014. 8 How often did that task force meet? 9 A. They meet quarterly now. I -- I 10 believe that I reviewed documents, and I think 11 I participated even in a couple of subcommittee 12 meetings. So the subcommittees meet more 13 frequently. The task force overall I believe 14 has always met just quarterly, but I know that 15 there were different subcommittee meetings that 16 happen at various times. 17 Q. Right. So let me ask you, to the 18 best of your ability, to put in your mind's eye 19 that meeting where -- 20 A. Uh-huh. 21 Q. -- the family member said "big 22 pharma" -- 23 A. Yes. 24 Q. -- and the -- sort of the 25 collective light went off, "Hey that's --</p>
<p style="text-align: right;">Page 435</p> <p>1 did you ask whether Summit County took any 2 actions in response to the DEA's setting of 3 quotas? 4 A. I don't know that we talked about 5 the -- the response. We talked about 6 influence, and -- and it was agreed that there 7 was really -- there was not -- that there was 8 no influence trying to be exerted over that. 9 In response to it, as far as, you know, 10 certainly there were investigations, but there 11 was nothing related to the setting of quotas. 12 Q. Okay. I want to ask you a few more 13 questions about this meeting of the task force 14 that took place in December of 2014, the one 15 where you said that slides were presented and 16 the family member said, "It's big pharma." 17 Do you remember that testimony from 18 earlier today? 19 MS. KEARSE: Object to form. 20 A. I -- I do. And I have to be 21 honest, I don't recall if it was the December 22 meeting or if it was in one of the early 23 meetings in 2015. I know that the first 24 meetings were at the end of '14, and I feel 25 like it was maybe not at the -- at that first</p>	<p style="text-align: right;">Page 437</p> <p>1 A. Yes. 2 Q. -- the cause." 3 Do you have any -- as -- are you 4 able to pinpoint whether that was December of 5 '14 or sometime in 2015? 6 A. I know there's a document that if I 7 looked at, it would say -- exhibit. That word. 8 Q. It's late. 9 A. It was an exhibit to Prosecutor 10 Wilms' testimony, and I remember because I was 11 sitting next to Prosecutor Wilms during that 12 meeting. And I talked with Attorney Feinstein 13 about, I looked at the number, and she said, 14 "Multiply that by 4." 15 So I know that -- that there was an 16 interaction between myself and the prosecutor, 17 about our alarm at that. I think it was 18 December, but I -- I couldn't say. 19 Q. But if we find that document -- 20 A. Yes. 21 Q. -- and it's dated, that will tell 22 us -- 23 A. Yes, absolutely. 24 Q. Okay. 25 A. Yes, absolutely.</p>

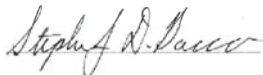
<p style="text-align: right;">Page 438</p> <p>1 Q. Thank you. What was your job in 2 December of 2014? Was that when you were a 3 legislator?</p> <p>4 A. I was not a legislator yet. I was 5 still a prosecutor. I was an assistant 6 prosecutor working for the chief prosecutor, 7 Wilms, at the time.</p> <p>8 Q. Okay. And were you prosecuting any 9 type of cases in particular at that time?</p> <p>10 A. It was -- so I was advising -- I 11 was the police legal advisor, so I was advising 12 police departments whose jurisdictions was 13 within the Akron Municipal Court on charging, 14 on search warrants, things like that.</p> <p>15 The actual handling of cases, I 16 handled felonies in arraignment court, so 17 setting bonds, attorneys becoming appointed, 18 initial appearances. And then I handled 19 misdemeanors in the courtrooms.</p> <p>20 Q. The -- the -- part of the 21 information that was presented at that meeting 22 was on a -- for one quarter -- I think I 23 understood your testimony, for one quarter, it 24 was number of pills in Summit County, correct?</p> <p>25 A. Correct.</p>	<p style="text-align: right;">Page 440</p> <p>1 significant changes to OARRS in 2014-ish, so I 2 don't know what was available. I -- I don't 3 believe -- there certainly wasn't the public 4 dashboard on OARRS that there is now. And I 5 think a lot of that information came from the 6 public dashboard, because Rich does not have 7 specific access like Dr. Smith would or a 8 physician would or law enforcement would.</p> <p>9 Q. Well, let me break that into 10 pieces. If in -- if by December of 2014 or 11 early 2015, whenever that meeting took place, 12 someone was able to go into the OARRS database 13 and pull out and analyze and sort out that the 14 number from 2010 was, I believe you said, 71.6?</p> <p>15 A. Yes.</p> <p>16 Q. That -- that data, whether it was 17 accessible or not to the statistician, that 18 data resided in the OARRS database as of 2010, 19 correct?</p> <p>20 MS. KEARSE: Object to form.</p> <p>21 A. I -- I don't -- I don't know. 22 Because I don't know -- the access to OARRS was 23 really limited to just one individual at a 24 time, so this sort of 30,000-foot view of 25 everything in the county, I don't know if that</p>
<p style="text-align: right;">Page 439</p> <p>1 Q. And you said that was that 2 testimony about, "Well, you have to multiply 3 that by 4" --</p> <p>4 A. Correct.</p> <p>5 Q. -- correct?</p> <p>6 You've also testified about this 7 count of 71 point I believe 4, or 72.8 pills 8 per person in Summit County that -- where did 9 that data come from?</p> <p>10 A. The 71.6 in 2010 was data that the 11 health department pulled from OARRS.</p> <p>12 Q. Okay. When did the health 13 department pull that data from OARRS?</p> <p>14 A. I don't know. I remember seeing 15 numbers like that, but I saw, in preparation 16 for my deposition, I reviewed a chart that was 17 produced by -- gosh, what's his name -- Rich 18 Marountas, who does a lot of the statistics at 19 public health.</p> <p>20 Q. The data that shows that number of 21 pills per person in Summit County from 2010 was 22 available in 2010, correct?</p> <p>23 MS. KEARSE: Object to form.</p> <p>24 A. You know, I -- I don't know the 25 answer to that. I know that there was</p>	<p style="text-align: right;">Page 441</p> <p>1 was being done.</p> <p>2 Q. Right, but let me draw a 3 distinction, ma'am. The -- draw a distinction 4 between access and the data.</p> <p>5 A. Oh, okay. Sure.</p> <p>6 Q. The data -- the data was in OARRS, 7 whether somebody could access it or not, 8 correct?</p> <p>9 MS. KEARSE: Objection.</p> <p>10 Speculation.</p> <p>11 A. I -- I honestly don't know. I 12 don't know what was being kept in 2010. My -- 13 my interaction with OARRS was limited on a 14 case-by-case basis.</p> <p>15 Q. But if the 2010 data in -- if 16 you're able, in 2014, to pull data from 2010 17 out of OARRS, wouldn't you agree with me that 18 that data must have been in there in 2010; 19 somebody didn't put it in later?</p> <p>20 MS. KEARSE: Object to form.</p> <p>21 A. No, I disagree. I mean, certainly 22 I -- we implemented a new system in Summit 23 County for our prosecutor's office that, you 24 know, we're -- we're inputting data and, you 25 know, reorganizing how data is aggregated and</p>

<p style="text-align: right;">Page 442</p> <p>1 mined to sort of be able to run reports more 2 effectively than -- than we could with prior. 3 So, I mean, someplace, somewhere 4 that data existed. Whether it was in OARRS, I 5 don't know, or if in 2014 they had to go back 6 and pull from different buckets to create 7 this -- this information. I don't know. 8 Q. In 2010, who controlled who had 9 access to OARRS? 10 A. Well, it's statutory. 11 Q. So it was controlled by the 12 legislature? 13 A. Yes. 14 Q. Okay. Changing subjects, and I'm 15 going to probably do that a bit now as we move 16 toward the conclusion. 17 A. Okay. 18 Q. You testified about this report 19 from October 1st of 2010, and we've marked as 20 an exhibit that. And then I understood your 21 testimony, some 35 days later Republicans were 22 elected, and you -- I think you used the term 23 that the report became obsolete? 24 A. Yeah. And, you know, I -- I'm not 25 suggesting that the report was buried. I</p>	<p style="text-align: right;">Page 444</p> <p>1 was as accurate 35 days later as the day it was 2 issued, correct? 3 A. That's fair. 4 Q. Okay. It's that the utility of the 5 report, because of the changes in the 6 administration, the utility was lower because 7 it didn't have an advocate? 8 A. I don't know if it's utility or 9 reach. I don't know who -- you know, who it 10 was disseminated to or who sort of, you know, 11 was carrying the torch at the time. 12 My assumption would be that it was 13 the governor. And then he wasn't the governor 14 anymore, and so at that point, I don't know how 15 far reaching that report would have been 16 carried. 17 Q. But the report still existed on the 18 government website, did it not? 19 MS. KEARSE: Object to form. 20 A. I don't know if it was on the 21 website. I know it's a public record, but, 22 again, if you don't know it's there can, you 23 don't know what to ask for kind of thing. 24 Q. Topic 23, I believe on that one we 25 can look, actually, to Attachment A.</p>
<p style="text-align: right;">Page 443</p> <p>1 certainly don't want that to be the impression. 2 What I can only surmise happened, 3 because it didn't reach people like myself, 4 like Prosecutor Gessner, like Jerry Craig, is 5 that it didn't have a champion anymore, that 6 the folks who really were invested in -- in the 7 mission that drove that report were no longer 8 in power. So it -- it wasn't that it got 9 buried or anything. It just didn't have a 10 champion. 11 Q. Okay. And I wasn't suggesting that 12 it got buried. 13 A. Yeah. 14 Q. I was trying to get at, when you 15 said obsolete, you're not intending to suggest 16 to the Judge or the jury that the data in the 17 report -- 18 A. Oh, yes. 19 Q. -- somehow turned out to be wrong 20 35 days later? 21 A. No, absolutely not. 22 Q. Okay. The report was accurate 35 23 days later? 24 MS. KEARSE: Object to form. 25 Q. Let me put it this way. The report</p>	<p style="text-align: right;">Page 445</p> <p>1 A. Okay. 2 Q. And Ms. Feinstein touched on this, 3 so I don't want to deal with it for a long 4 time. But the topic is any task force program, 5 working group, committee, or other organization 6 designed to address opioid prescribing, 7 promotion, marketing, distribution, diversion, 8 use, and/or misuse. 9 A. Uh-huh. 10 Q. When is -- when was the very first 11 time there was a task force or a program or 12 working group or committee or other 13 organization in Summit County to address these 14 topics relating to opioids? 15 A. Well, there -- there has been a 16 drug task force for decades. They were not 17 specifically targeting opioids only. They -- 18 you know, whatever drug. So they weren't just 19 for opioids, but they've always -- there's 20 always been a drug task force within our law 21 enforcement agencies. 22 The first one that I am aware of is 23 the Opiate Task Force that we've talked about, 24 that ADM hosts. In early 2017 -- sorry -- 25 Q. '14?</p>

<p style="text-align: right;">Page 446</p> <p>1 A. No. That was in 2014.</p> <p>2 At the end of 2017, the United Way</p> <p>3 of Summit County made invitations to community</p> <p>4 leaders to convene an opioid leadership council</p> <p>5 made up of elected officials, business leaders,</p> <p>6 clergy, and the local philanthropic</p> <p>7 organizations to come together to have</p> <p>8 conversation about it from sort of a more</p> <p>9 executive level.</p> <p>10 At that point the Opiate Task Force</p> <p>11 had approximately 400 members, and so it was</p> <p>12 really robust, and everyone from consumers of</p> <p>13 treatment to the county executive could be in</p> <p>14 the room at the same time.</p> <p>15 So that task force was brought</p> <p>16 together, and the executive declared the state</p> <p>17 of emergency in October of 2017, and with that</p> <p>18 state of emergency, mobilized the Incident</p> <p>19 Management Assistance Team to formulate a plan</p> <p>20 in response to the opioid epidemic.</p> <p>21 As part of the IMAT plan moving</p> <p>22 forward, there was a grant. I believe it was</p> <p>23 grant money that was used to bring in some</p> <p>24 experts on what we call intercept mapping, and</p> <p>25 identifying, really, what do we have in Summit</p>	<p style="text-align: right;">Page 448</p> <p>1 groups or organizations. There have certainly</p> <p>2 been community meetings in every one of the 31</p> <p>3 communities within Summit County, trying to get</p> <p>4 information from law enforcement, trying to get</p> <p>5 information from public health. So I wouldn't</p> <p>6 call it a task force, but there have certainly</p> <p>7 been different community groups coming together</p> <p>8 for these discussions.</p> <p>9 Q. Ms. Johnson, the task force that</p> <p>10 you said had been in place for decades, that</p> <p>11 was called the "Drug Task Force"?</p> <p>12 A. The Summit County Drug Unit.</p> <p>13 Q. And was that a -- was that a group</p> <p>14 that was solely within law enforcement?</p> <p>15 A. Yes.</p> <p>16 Q. Okay. The group that met in</p> <p>17 December of 2014 or early 2015, what was that</p> <p>18 task force called?</p> <p>19 A. That was the Summit County</p> <p>20 Opioid Task For- -- or Opiate Task Force, I</p> <p>21 think.</p> <p>22 Q. And was the meeting in December of</p> <p>23 2014 or early in 2015 the first meeting with</p> <p>24 the Summit County Opiate Task Force?</p> <p>25 A. Yes.</p>
<p style="text-align: right;">Page 447</p> <p>1 County as far as our resources. And by</p> <p>2 resources I mean what treatment of -- what</p> <p>3 treatment is out there, what education programs</p> <p>4 are out there, what interdiction. Just really</p> <p>5 taking a global perspective on everything that</p> <p>6 was touching the crisis. And they created some</p> <p>7 priorities from that, and the IMAT team is</p> <p>8 implementing those priorities through this</p> <p>9 structure with United Way.</p> <p>10 The other organizations or working</p> <p>11 groups are ongoing ones. We have a criminal</p> <p>12 justice advisory board where there is</p> <p>13 discussion about opioids. There is a jail</p> <p>14 capacity monthly meeting where we talk about</p> <p>15 exactly what it is, jail capacity: who's in</p> <p>16 the jail, what are our pressure points there.</p> <p>17 There has been a task force</p> <p>18 assembled of elected officials and community</p> <p>19 leaders regarding the jail operations, and part</p> <p>20 of their research focused on treatment in the</p> <p>21 jail, specifically for opioids, and what</p> <p>22 opportunities are available for treatment</p> <p>23 there. And that was done in 2018.</p> <p>24 There are other -- make sure I'm</p> <p>25 reading this correctly -- you know, working</p>	<p style="text-align: right;">Page 449</p> <p>1 Q. Okay. In general terms, who was</p> <p>2 involved in that? What categories of people?</p> <p>3 Law enforcement, et cetera?</p> <p>4 A. Sure, there was law enforcement,</p> <p>5 judges, treatment providers, health care</p> <p>6 professionals. And I know treatment providers</p> <p>7 are health care professionals, but I think of,</p> <p>8 you know, addiction treatment providers.</p> <p>9 Hospital representatives, consumers of</p> <p>10 treatment, family members there to support,</p> <p>11 elected officials, public health was always</p> <p>12 represented, ADM was always represented.</p> <p>13 Interested community members, members of the</p> <p>14 clergy. It was a -- it was a wide variety of</p> <p>15 individuals.</p> <p>16 Q. And, again, at that meeting, the</p> <p>17 bulb goes off. Big pharma is disc- -- or the</p> <p>18 pharma industry is the, I think, what you said</p> <p>19 was -- was the word that was used. And you</p> <p>20 testified in response to one of Ms. Feinstein's</p> <p>21 question that the action that Summit County</p> <p>22 chose to take was to file this lawsuit.</p> <p>23 MS. KEARSE: Object to form.</p> <p>24 Q. Correct?</p> <p>25 A. We --</p>

<p style="text-align: right;">Page 450</p> <p>1 Q. Not to report to the DEA or the 2 FDA; it was to pursue claims against 3 manufacturers and distributors of prescription 4 opioids?</p> <p>5 MS. KEARSE: Object to form.</p> <p>6 A. That is how we chose to address 7 getting at the industry, yes, that's correct.</p> <p>8 Q. Was a lawsuit discussed at that 9 meeting, the one in December of '14 or early 10 '15?</p> <p>11 A. No.</p> <p>12 Q. Okay. When was the first time a 13 lawsuit was discussed, to your knowledge?</p> <p>14 A. I can't speak for some of the 15 smaller communities. But, you know, if there 16 were discussions on, you know, Mogadore council 17 I don't know.</p> <p>18 But as the County as a whole, those 19 discussions began in 2000 -- early 2017, yes. 20 Perhaps even late 2016, but probably more 21 realistically, like, talking about it 22 legitimately in 2017.</p> <p>23 Q. Okay. If the light went off, at 24 least in your head, in December of '14 or early 25 2015, why did there not be -- well, why was</p>	<p style="text-align: right;">Page 452</p> <p>1 reduction. People stopped dying five and six a 2 day. I mean, we were literally having five and 3 six people die every day. And when we flooded 4 our streets with Narcan and with information 5 and perhaps the Good Samaritan bill played a 6 role; I don't know. I think that that whole 7 idea of understanding you can't dump people in 8 fields. We got better at harm reduction.</p> <p>9 And because we spent a lot of money 10 and a lot of effort at it, we were to be able 11 to take that collective breath and say, "Okay, 12 we have put the tourniquet on, we have triaged 13 this. Now what is the surgical step to help us 14 in our process of getting better?"</p> <p>15 Q. You testified earlier that one of 16 the transcripts that you reviewed in preparing 17 for your deposition was Dr. Doug Smith?</p> <p>18 A. Yes.</p> <p>19 Q. Okay. What -- for the record, what 20 is his position?</p> <p>21 A. He is the medical director for the 22 ADM Board.</p> <p>23 Q. Do you believe he's knowledgeable?</p> <p>24 A. Oh, sure.</p> <p>25 Q. Knowledgeable about opioid issues?</p>
<p style="text-align: right;">Page 451</p> <p>1 there not any consideration of a lawsuit until 2 late 2016, early 2017?</p> <p>3 MS. KEARSE: Object to form.</p> <p>4 A. We were still just trying to save 5 lives. And -- and I am not saying that in a 6 cliché way. The focus was not on getting at 7 the head of the monster. The focus was on 8 saving people in our community. Our collective 9 resources and efforts were very specifically 10 directed at treatment, at how to increase the 11 bed capacity, how to find ways to leverage 12 funds, how to make sure we could staff these 13 places, because the real concern, I recall, at 14 some of those early meetings was, even if we 15 increase capacity, do we have educated 16 professionals to treat these folks? If -- if 17 we built a thousand-bed facility, who would run 18 it?</p> <p>19 So there -- there was a real focus 20 on saving lives that was really overwhelming 21 the conversation in '15 and '16.</p> <p>22 Q. What changed in late 2016 or early 23 2017 when there was a discussion of -- of the 24 lawsuit?</p> <p>25 A. We finally got better at harm</p>	<p style="text-align: right;">Page 453</p> <p>1 A. Yeah, of course.</p> <p>2 Q. Do you believe he has expertise?</p> <p>3 A. Yes.</p> <p>4 Q. Do you respect his opinion?</p> <p>5 MS. KEARSE: Object to form.</p> <p>6 A. He and I have had disagreements on 7 certain things.</p> <p>8 Q. We can disagree but still respect 9 each other, correct?</p> <p>10 A. You and I can talk after this.</p> <p>11 But I -- I believe that Dr. Smith 12 is -- is certainly well versed in -- in 13 opioids, yes.</p> <p>14 Q. Well, I'll state for the record I 15 respect you.</p> <p>16 A. Appreciate that.</p> <p>17 Q. Captain Baker, who wrote this drug 18 threat assessment back in 2005, was he at the 19 Summit County Opiate Task Force meeting in 20 December of '14 or early '15?</p> <p>21 A. I don't know that he was. I think 22 he had retired at that point.</p> <p>23 Q. Okay. I'm going to --</p> <p>24 A. It was right around that time.</p> <p>25 Q. What about Detective Paolino?</p>

<p style="text-align: right;">Page 454</p> <p>1 A. Paolino? I'm sure -- I'm sure he 2 was -- I'm sure one of them was or someone on 3 their task -- on the Summit County Drug Unit 4 was. I -- I recall seeing detectives there 5 very frequently, sure. 6 Q. During that meeting did he 7 contribute that he thought that by October of 8 2014, the availability of controlled 9 prescription drugs was increasing? 10 A. He who, please. 11 Q. Oh, sorry. Detective Paolino. 12 A. Paolino? Did he -- 13 Q. At that meeting, as this discussion 14 was taking place about opiates, did he raise 15 his hand and say, "Well, from my perspective, 16 the availability of controlled prescription 17 drugs is decreasing"? 18 A. I don't remember him saying that, 19 no. 20 Q. Did he say anything about that the 21 distribution at that time of controlled 22 prescription drugs was decreasing? 23 A. I don't recall if Detective Paolino 24 was at that particular meeting. I know I have 25 seen him at them, but I -- I don't recall</p>	<p style="text-align: right;">Page 456</p> <p>1 concluded. 2 THE WITNESS: Thank you. 3 MR. SCHUTTE: Thank you for your 4 time and your patience. 5 THE WITNESS: Thank you. 6 THE VIDEOGRAPHER: This concludes 7 the deposition. The time is 8:56 p.m. 8 (Deposition concluded at 8:56 p.m.) 9 ~ ~ ~ ~ ~ 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>
<p style="text-align: right;">Page 455</p> <p>1 whether he was even at that particular one. 2 MR. SCHUTTE: What I would suggest, 3 Ms. Kearse, is that we take five or 10 minutes. 4 I'm pretty close to being finished, but let me 5 just circle up with my colleague and see if we 6 can close this out. 7 MS. KEARSE: Okay. 8 MR. SCHUTTE: All right. 9 THE VIDEOGRAPHER: Off the record 10 at 8:34. 11 (A recess was taken.) 12 THE VIDEOGRAPHER: On the record at 13 8:56. 14 MR. SCHUTTE: Ms. Johnson, I have 15 no further questions. 16 Does anybody on the phone have any 17 questions? 18 Hearing none -- 19 MR. JOHNSON: No. 20 MR. SCHUTTE: Plaintiff's counsel? 21 MS. KEARSE: Okay. Give us one 22 second. 23 Ms. Johnson, thank you for being 24 here today and answering the questions of 25 counsel. I think this deposition is now</p>	<p style="text-align: right;">Page 457</p> <p>1 Whereupon, counsel was requested to give 2 instructions regarding the witness's review of 3 the transcript pursuant to the Civil Rules. 4 5 SIGNATURE: 6 Transcript review was requested pursuant to the 7 applicable Rules of Civil Procedure. 8 9 TRANSCRIPT DELIVERY: 10 Counsel was requested to give instructions 11 regarding delivery date of transcript. 12 13 14 15 16 17 18 19 20 21 22 23 24 25</p>

<p style="text-align: right;">Page 458</p> <p>1 REPORTER'S CERTIFICATE</p> <p>2 The State of Ohio,)</p> <p>3 SS:</p> <p>4 County of Cuyahoga.)</p> <p>5</p> <p>6 I, Stephen J. DeBacco, a Notary</p> <p>7 Public within and for the State of Ohio, duly</p> <p>8 commissioned and qualified, do hereby certify</p> <p>9 that the within named witness, GRETA JOHNSON,</p> <p>10 was by me first duly sworn to testify the</p> <p>11 truth, the whole truth and nothing but the</p> <p>12 truth in the cause aforesaid; that the</p> <p>13 testimony then given by the above-referenced</p> <p>14 witness was by me reduced to stenotypy in the</p> <p>15 presence of said witness; afterwards</p> <p>16 transcribed, and that the foregoing is a true</p> <p>17 and correct transcription of the testimony so</p> <p>18 given by the above-referenced witness.</p> <p>19 I do further certify that this</p> <p>20 deposition was taken at the time and place in</p> <p>21 the foregoing caption specified and was</p> <p>22 completed without adjournment.</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 460</p> <p>1 Veritext Legal Solutions</p> <p>2 1100 Superior Ave</p> <p>3 Suite 1820</p> <p>4 Cleveland, Ohio 44114</p> <p>5 Phone: 216-523-1313</p> <p>6 January 18, 2019</p> <p>7 To: Ms. Kearse</p> <p>8 Case Name: In Re: National Prescription Opiate Litigation v.</p> <p>9 Veritext Reference Number: 3190232</p> <p>10 Witness: Greta Johnson , 30(B)(6) Deposition Date: 1/15/2019</p> <p>11 Dear Sir/Madam:</p> <p>12 Enclosed please find a deposition transcript. Please have the witness</p> <p>13 review the transcript and note any changes or corrections on the</p> <p>14 included errata sheet, indicating the page, line number, change, and</p> <p>15 the reason for the change. Have the witness' signature notarized and</p> <p>16 forward the completed page(s) back to us at the Production address</p> <p>17 shown</p> <p>18 above, or email to production-midwest@veritext.com.</p> <p>19 If the errata is not returned within thirty days of your receipt of</p> <p>20 this letter, the reading and signing will be deemed waived.</p> <p>21 Sincerely,</p> <p>22 Production Department</p> <p>23</p> <p>24</p> <p>25 NO NOTARY REQUIRED IN CA</p>
<p style="text-align: right;">Page 459</p> <p>1 I do further certify that I am not</p> <p>2 a relative, counsel or attorney for either</p> <p>3 party, or otherwise interested in the event of</p> <p>4 this action.</p> <p>5 IN WITNESS WHEREOF, I have hereunto</p> <p>6 set my hand and affixed my seal of office at</p> <p>7 Cleveland, Ohio, on this 18th day of</p> <p>8 January, 2019.</p> <p>9</p> <p>10</p> <p>11</p> <p>12 </p> <p>13</p> <p>14 Stephen J. DeBacco, Notary Public</p> <p>15 within and for the State of Ohio</p> <p>16</p> <p>17 My commission expires September 30, 2022.</p> <p>18</p> <p>19</p> <p>20</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 461</p> <p>1 DEPOSITION REVIEW</p> <p>2 CERTIFICATION OF WITNESS</p> <p>3 ASSIGNMENT REFERENCE NO: 3190232</p> <p>4 CASE NAME: In Re: National Prescription Opiate Litigation v.</p> <p>5 DATE OF DEPOSITION: 1/15/2019</p> <p>6 WITNESS' NAME: Greta Johnson , 30(B)(6)</p> <p>7 In accordance with the Rules of Civil</p> <p>8 Procedure, I have read the entire transcript of</p> <p>9 my testimony or it has been read to me.</p> <p>10 I have made no changes to the testimony</p> <p>11 as transcribed by the court reporter.</p> <p>12</p> <p>13 Date Greta Johnson , 30(B)(6)</p> <p>14 Sworn to and subscribed before me, a</p> <p>15 Notary Public in and for the State and County,</p> <p>16 the referenced witness did personally appear</p> <p>17 and acknowledge that:</p> <p>18 They have read the transcript;</p> <p>19 They signed the foregoing Sworn</p> <p>20 Statement; and</p> <p>21 Their execution of this Statement is of</p> <p>22 their free act and deed.</p> <p>23</p> <p>24 I have affixed my name and official seal</p> <p>25 this ____ day of _____, 20____.</p> <p>Notary Public</p> <p>Commission Expiration Date</p>

Page 462

1 DEPOSITION REVIEW
CERTIFICATION OF WITNESS

2

3 ASSIGNMENT REFERENCE NO: 3190232
CASE NAME: In Re: National Prescription Opiate Litigation v.
DATE OF DEPOSITION: 1/15/2019
4 WITNESS' NAME: Greta Johnson , 30(B)(6)
5 In accordance with the Rules of Civil
Procedure, I have read the entire transcript of
6 my testimony or it has been read to me.
7 I have listed my changes on the attached
Errata Sheet, listing page and line numbers as
8 well as the reason(s) for the change(s).
9 I request that these changes be entered
as part of the record of my testimony.
10
11 I have executed the Errata Sheet, as well
12 as this Certificate, and request and authorize
13 that both be appended to the transcript of my
testimony and be incorporated therein.

14 _____
Date Greta Johnson , 30(B)(6)

15 Sworn to and subscribed before me, a
16 Notary Public in and for the State and County,
the referenced witness did personally appear
17 and acknowledge that:
18 They have read the transcript;
They have listed all of their corrections
19 in the appended Errata Sheet;
They signed the foregoing Sworn
Statement; and
20 Their execution of this Statement is of
their free act and deed.
21 I have affixed my name and official seal
22 this _____ day of _____, 20____.
23 _____
Notary Public
24
25 _____
Commission Expiration Date

Page 463

1 ERRATA SHEET
VERITEXT LEGAL SOLUTIONS MIDWEST

2 ASSIGNMENT NO: 1/15/2019

3 PAGE/LINE(S) / CHANGE /REASON

4 _____
5 _____
6 _____
7 _____
8 _____
9 _____
10 _____
11 _____
12 _____
13 _____
14 _____
15 _____
16 _____
17 _____
18 _____
19 _____

20 _____
Date Greta Johnson , 30(B)(6)

21 SUBSCRIBED AND SWORN TO BEFORE ME THIS _____
22 DAY OF _____, 20____.
23 _____
Notary Public
24
25 _____
Commission Expiration Date

117 (Pages 462 - 463)

[& - 15]

Page 1

&	263:24 269:17,24	110 10:19	265:4,18 270:17
& 2:19 3:2,9,15	271:9 281:24	1100 3:5 460:1	273:11,15 274:18
4:3,7 5:5 15:21	282:10 283:5	111 10:19	275:5 278:22
16:7,9	287:12 299:17,21	112 10:20,20	283:24 284:10
0	299:22 300:3,6	114 10:21	294:11 300:25
000020323 7:10	330:23,23 331:7	11472 459:13	340:9
61:11	335:2,13 336:18	116 10:21	133 10:25
000023567 7:7	339:6,8,10 340:2	118 7:18	136 8:1
48:3	341:22 343:7	11:09 125:10	138 11:1
000023648 7:7	344:9,22 345:7	12 8:18 182:18	139 11:1
48:3	408:7,7 412:10	264:22 273:10,15	14 9:1 24:10 25:16
000072535 7:13	455:3	274:18 275:5	25:18 45:1 58:23
67:16,21	10,000 202:15,16	278:22 283:24	77:23 94:6 140:24
000072541 7:13	202:17,20	284:10 294:11	141:16 142:23
67:22	10/1/2010 9:13	300:25 340:8,9	143:9 162:8
000350711 7:16	378:13	345:11,24 392:6	167:12 190:23
88:15	10/6/2014 7:11	12/12/2018 8:4	222:8 265:11
000350712 7:17	67:19	182:3	274:2,7 280:4,5,8
88:16	100 28:16,23 77:1	120 130:19 284:20	280:17 282:25
019001392374	93:21 247:11	285:14 286:4,13	284:14 285:3
9:18 386:1	406:11,13	288:8 290:5,11	288:2 291:23
1	104 10:15	291:7 293:14	300:3,9,13 329:9
1 7:3 22:3,6 33:2	105 10:15	294:20 295:6	362:2 367:21,23
188:22 220:16,17	106 10:16,16	296:1,13 303:5	367:23 387:22
269:8 347:23	107 10:17	307:1,14,19,20,23	388:25 435:24
349:1 366:14,22	108 10:17	308:2,6,15 309:8	437:5 445:25
382:5 388:1	109 10:18,18	311:22 313:17	450:9,24 453:20
397:16 415:8	10:00 32:10	316:6 321:13	141 11:2
433:11	10:51 125:5	328:9,14 332:23	143 11:2
1/15/2019 460:8	11 8:11 128:24	121 10:22,22	145 11:3
461:3 462:3 463:2	229:14 264:10	122 10:23	15 1:18 9:6 14:13
1/25/2006 7:14	270:10,19 271:7	123 10:23	45:1 77:23 94:6
88:13	272:22,25 273:23	124 10:24	95:4 194:17
1/8/2019 9:1	274:3 291:5	127 4:15 10:24	220:19 221:9,16
265:12	299:17,22 300:3,6	128 7:22	222:6,10 237:25
10 8:6 44:10 73:21	314:16,17,24	12:21 181:24	238:24 243:9
123:16 125:23	315:20 316:4	13 8:17,21 9:5	246:15 265:21
126:12 172:9	317:1 318:7	25:4 58:23 72:25	270:23 290:19,24
188:23,24 246:15	326:13 329:8	140:23 141:16	294:11 314:24
252:15 253:20	344:22	142:22 143:9	315:1 317:1 340:9
		162:8 264:18	349:17 362:2

[15 - 2019]

Page 2

367:24 413:16 450:10 451:21 453:20 150 186:10 188:15 208:12 283:18 285:4,12,14 286:6 287:19 289:15 294:15,24 295:7 295:25 296:13 307:22 314:9 321:16 15219-6401 3:17 155 11:3 157 11:4 158 11:4 16 9:9 45:1 77:24 94:6 95:4 221:9 221:16 243:14 266:3 290:19,25 294:11 340:9 345:12,24 451:21 160 11:5 17 1:7 6:8 9:11 14:23 23:16 45:1 194:17 266:9 336:15,17 338:13 171 11:5 173 11:6 174 11:6 175 11:7 176 11:7 178 11:8 18 1:11 9:13 191:1 237:14 378:12,20 378:21 379:6,21 379:23 382:22 389:23 460:4 180 11:8 182 8:4 1820 460:2	184 11:9 186 11:9 189 11:10 18th 459:7 19 9:16 23:21 182:24 183:13 267:10,16,16,24 282:12 291:4 295:17 343:12 385:21 386:6 387:2 1980 78:1 1989 1:22 14:16 199 78:22 1990s 431:14 1992 78:10,23 79:3 79:11 1:10 182:9 1a 68:20 1st 62:9 213:18 442:19	2000s 43:18,25 44:15 46:10,19 54:7 55:22,23 56:15 57:4 58:4 59:12 89:4 93:18 116:7 141:20 221:7,25 353:13 395:5 2001 9:17 55:24 385:25 386:12,14 388:17 2004 52:17 2005 47:22 49:2,3 49:9,10 50:21 51:8 52:9 54:2,3,6 427:10 428:7 453:18 2006 49:10 50:21 88:10 89:18,21,22 89:24 405:3 2007 46:20 353:23 2007-2008 353:17 2008 46:20 2009 46:22 55:24 142:22 2010 56:1 72:23 354:6,9,22 358:17 363:7 373:5,17,21 377:22 378:22 382:5,13 395:6,12 439:10,21,22 440:14,18 441:12 441:15,16,18 442:8,19 2011 60:23 162:13 2012 70:2 72:22 321:21 358:20 373:13,23 395:7 2013 140:21 156:14 223:15,22 224:3,7 407:23	409:19 2014 59:22 95:3 137:13,15 140:21 156:14 222:15 350:17 351:18 352:25 355:3,8 357:21 362:24 363:8 367:19 395:2,15 435:14 436:7 438:2 440:1 440:10 441:16 442:5 446:1 448:17,23 454:8 2014-2015 222:12 352:8 356:15 372:1 376:13 396:12 2015 7:12 67:19 68:3,9 70:3,18 71:2 350:17 351:12,12,19 353:1 435:23 437:5 440:11 448:17,23 450:25 2016 7:9 34:11 61:3,9 62:10 91:18 148:12 174:23 175:24 176:3 192:23 193:19 251:10 259:6,11 450:20 451:2,22 2017 445:24 446:2 446:17 450:19,22 451:2,23 2018 23:16 182:18 270:6,25 447:23 2019 1:18 14:13 281:2 288:1 291:5 459:8 460:4
	2		
	2 6:3 7:5 47:20,25 70:5,9,10 125:8 270:6 280:22 282:25 283:2 287:10 427:5,19 428:2 20 30:23 77:5,11 134:20 177:18 239:19 405:16,23 406:5,12 461:16 462:22 463:22 200 186:2,15,15 188:6,15,19 208:12 2000 4:15 78:14,23 79:5,11 450:19 20001-4956 4:9 20005 2:20		

[202 - 40]

Page 3

202 2:21 4:9	279 11:20,21	304 12:2,3,3	351 12:15
2022 459:17	28 2:6	305 2:16 12:4	357 12:16
205 11:10,11	2804 1:6,7 14:23	306 12:4	358 12:16
206 11:11	281 11:21,22	307 12:5	36 10:3 136:18
208 11:12	282 11:22	309 12:5	360 12:17
21 379:21,23	285 11:23	31 63:21 254:23,25	362 12:17
389:23	29464 2:7	270:25 448:2	363 12:18
210 11:12	296 11:23	312 3:11 5:7 12:6	364 12:18
216 3:6 4:16,17	299 11:24	318 12:6,7	365 12:19
216-523-1313	2:00 409:9	3190232 460:7	367 12:19
460:3	2:17 237:3	461:2 462:2	368 12:20
216-9140 2:7	2:42 237:7	31st 62:10	374 12:20
216-9163 2:8	3	320 12:7	376 12:21
216-9225 2:9	3 7:8,20 61:4,5,7	321 12:8,8	378 9:13
216-9461 2:10	62:15 118:2,10	324-1481 5:7	382 12:21
22 7:3	233:9 237:6 239:5	324-1773 3:11	385 9:16
221 4:22	239:20 346:13	325 12:9,9,10	39 72:22 94:19
224 11:13	347:10 349:2	326 12:10	104:3 321:20
225 11:13	30 1:17 7:3 8:10	327 12:11	390 12:22
23 444:24	22:8,13 87:18	328 12:11	392 12:22
235 11:14	102:10,25 134:21	329 12:12	395 12:23
236 11:14	186:25 206:2,7	32nd 3:16	396 12:23
2370 389:4	225:21,24 226:8	33 400:16 401:20	398 6:10
242 11:15	229:22 264:6	401:24	399 12:24
248 11:15	295:18 298:2,11	330 12:12	3:15 263:21
249 11:16	307:18 343:14	3300 2:15	3:38 266:16
25 88:10 400:16	346:14 359:24	33131 2:15	4
401:20,24	370:9 399:23	332 12:13	4 7:11 23:21 61:1
250 188:15	400:21,23 402:12	337 12:13	67:14,18 182:23
252 11:16	426:6 433:15,16	34 366:20 367:3,11	183:13 251:24
254 11:17	459:17 460:8	397:15 415:12,20	252:5,14 267:9,16
256 11:17	461:4,9 462:4,13	415:21 418:20	267:16,24 282:12
261 11:18,18	463:20	419:19,23 421:4	282:25 283:2
263 8:6	30,000 440:24	421:23 424:2	287:6 288:2
264 8:11,18	300 11:24,25	340 12:14	295:17 300:13
265 8:21 9:1,6	147:19 176:7	342 12:14	335:14,15 343:11
266 6:9 9:9,11	300,000 176:7	343 12:15	372:22 437:14
271 11:19	301 12:1	35 354:16,23	439:3,7
274 11:19	302 12:1	399:23 442:21	40 10:3 44:8,8
276 11:20	303 12:2	443:20,22 444:1	83:25 111:20
			334:11 358:13,15

[40 - 861-7582]

Page 4

358:23 394:12 400 12:24 65:13 446:11 401 12:25 402 13:1,1 405 13:2 406 13:2 41 10:4 412 3:17 415 4:5 419 13:3 420 13:3 421 13:4 422-9444 4:23 425 13:4 426 13:5,5 429 13:6,6 430 13:7 432 13:7 434-5172 2:21 435 13:8 439 13:8 440 13:9 441 13:9,10 44113-7213 3:5 44114 460:2 44114-1214 4:16 443 13:10 44321 17:11 444 13:11 4488 17:10 449 13:11 450 13:12 45090 1:11 451 13:12 451,000 358:22 453 13:13 458 6:12 47 7:5 47708 4:22	48 83:17,25 49 10:4 490 409:1,13 4:00 409:3 4:29 313:4 5 5 7:14 9:5 23:21 64:13 88:9,12 118:22 172:9 182:23 183:13 265:18 267:9,16 267:16,24 268:3 282:12 295:17 326:15 339:7 343:11 500 271:14 273:2,8 279:14 283:14 284:16 285:11,19 285:24 286:12 287:15 289:11 292:5 294:14 321:25 501 239:5,20 52 83:17,25 541,000 358:22 56 10:5 560-7455 3:17 59 10:5 591-7072 4:5 5:00 32:9 5:05 313:7 5s 160:16 6 6 1:17 7:3,18 8:10 22:8,13 23:21 117:23 118:5 123:18 125:22 182:23 183:13 206:2,7 228:24 264:6 267:9,16,16	267:24 272:23 278:25 281:24 282:10,12 283:5 287:12 295:17,18 298:11 314:21 326:15 343:11 344:8 345:6 346:14 426:6 460:8 461:4,9 462:4,13 463:20 60 52:17 260:20 307:18 400:2 427:13 600 2:15 60601-5094 3:10 5:7 61 7:8 62 48:24 50:3 428:4 64 427:21,22 428:11 66 186:8 188:15 662-5786 4:9 67 7:11 696-5474 3:6 6:04 366:3 6:24 366:6 6:30 370:21 6:40 370:24 7 7 6:5 7:22 128:5 128:11 190:20,20 190:21 237:10 252:15 281:24 282:10 283:5 287:12 331:7,13 335:20 338:14 344:8 345:6 70 400:3 71 10:6 439:7	71.6 358:17,25 439:10 440:14 714-9719 2:16 72 10:6 104:3 72.8 358:20,25 439:7 720 321:25 725 2:20 730 286:13 288:6 289:21 75 411:4 77 3:10 5:6 10:7 78 10:7 79 10:8 7:10 397:5 7:35 397:8 8 8 8:1 120:8 126:13 136:3,9 172:9 252:15 270:2 281:1 288:1 412:10 80 10:8,9 73:12,23 74:16,16,17 75:24 76:1,6,7 77:1,4 134:21 403:25 405:20 406:2 407:17 408:3 409:25 411:2,6,7 412:10,16,21 413:19 414:9 80s 154:12 81 10:9,10 812 4:23 84 10:10 843 2:7,8,9,10 85 411:5 850 4:8 861-7420 4:16 861-7582 4:17
---	--	--	--

[87 - addicted]

Page 5

87 10:11	142:16,18 160:1	168:25 169:7	449:21 459:4
88 7:14	160:25 186:21	181:14 260:23	actions 53:7
8:30 1:19 14:14	196:4 200:3	276:7 277:18,19	346:22 376:5
8:34 455:10	207:23 208:5	301:23 303:21	433:21 434:7,11
8:56 455:13 456:7	209:4 220:13	440:7,22 441:4,7	434:24 435:2
456:8	228:8 261:1	442:9	actiq 317:3,19
9	312:14 337:19	accessible 44:4	active 356:12
9 8:4 182:2,17	394:14 422:24	440:17	358:12 405:18
366:20 367:3,11	437:4 440:12	accessing 99:7	activities 189:9,23
397:14	441:16 442:1	accident 333:11	206:12 208:17
90 260:20 290:9,14	452:10	358:11,14 393:12	209:11 346:19
294:17,18 307:8	absolutely 33:22	account 248:11,12	353:10 355:2,10
307:10,13,19,19	38:11,20 55:9	accreditation 9:16	360:12,16 362:7
321:9	71:19 94:12	377:2 385:15,23	362:20 363:18
90s 93:17 154:12	115:17 173:23	386:13 389:14	364:4 365:18
431:4,8	174:1 268:15	accrediting 387:12	activity 59:10,24
92 10:11,12,12	287:22 289:6	accuracy 63:8,10	87:7 150:25 180:7
94 10:13	313:25 333:8,13	accurate 52:20	206:19 363:19
94111-5356 4:5	334:23 348:7	100:3 103:5,8	365:5
95 10:13	355:13 382:12	169:6 183:2,12	acts 56:25
950 3:5	392:18 411:3	191:24 192:6	actual 122:12
97 10:14	437:23,25 443:21	293:22 305:3	271:23 297:2
98 10:14	abuse 9:14 51:25	443:22 444:1	438:15
9:28 67:9	59:11 83:14 315:7	accurately 182:21	acute 83:8 306:14
9:42 67:12	316:11 328:21	329:24	adams 3:4 15:23
a	378:14,23	acknowledge	15:23
a.m. 1:19 14:14	abused 90:19	193:9 392:15	adapt 93:3
32:9 409:3	abusing 401:14	461:11 462:16	add 42:9,15
aaron 1:8	accept 77:10	acknowledgement	179:20
abate 257:8	accepted 228:13	357:5	added 23:18
abbot 404:16	access 99:9 113:20	acres 239:19	182:24 183:15
abdc 16:14	114:7 140:25	acronyms 30:12	393:2
ability 156:10	142:18,20 143:22	act 56:24 114:19	addendum 49:3
162:11 196:9	150:23 151:17,22	461:14 462:20	addendums 49:12
198:8 243:10	151:23 152:2,4,5	actavis 3:13,14 5:3	addict 410:4
260:4 277:16	153:4,10 156:19	5:3	addicted 37:2 44:8
364:15 365:21	157:15 158:4,6,8	acted 103:6 396:9	46:13 77:17 78:1
436:18	158:12 161:11,13	acting 113:11	78:10,13 80:11
able 32:4 114:4	163:6 164:6,21,22	114:22	85:5,9 94:23
115:1 140:7	166:10,16,17,20	action 341:6	97:14 98:12 99:12
	167:5,6,7,9 168:5	363:23 395:23,24	99:14,16 106:13

[addicted - ahead]

Page 6

109:22 114:2,17 157:7 175:16 176:19 184:19 185:3,3,14,15 215:6 219:6 241:8 249:4 257:18 260:3,3,4,14 261:11,22 262:14 343:4 352:13 400:18 401:3,21 402:20,25 403:17 412:17 415:1 addiction 34:19 35:4 42:6 44:11 47:12 60:16 77:14 77:20,21 83:4,11 84:3,17 102:23 117:7 138:9 153:19 154:2,6,22 155:4 156:23 184:24 186:3 196:6 198:21 211:9 214:20 215:14,16,22 217:1,17 218:18 219:11,13,15 223:3 228:18 230:11 231:16 239:10 240:25 241:17,20 246:21 248:18 249:16 257:19,23 258:15 259:5,20 260:2,12 260:23 261:10,24 286:5 290:10 305:4 307:13 321:11 329:24,25 330:1,4 334:25 352:21 362:13 370:6 391:24 392:9 393:6	400:23 403:3 404:5,10,12,13 411:20 449:8 addictive 58:3,16 80:6 107:22 141:4 158:2 392:3 423:11 addicts 99:15 138:5,11,12,13,22 138:24 230:17 249:3,4 402:1 403:21 404:7 addition 147:19 212:12 335:6 357:3 367:9,12 400:2 additional 53:15 236:17 246:24,24 267:1 276:2 281:21 282:20 288:6 289:21 290:22 316:8,17 340:13 343:13 additionally 179:11 198:16 218:8 259:19 address 17:9 33:13 107:16 195:13 197:19 215:2 251:15 366:18 396:7 432:3 445:6,13 450:6 460:15 addressed 207:6 230:2 281:2 364:12 372:2 addressing 87:6 236:22 adequately 257:7 adjournment 458:22	adjusted 93:7 adm 26:19 28:22 44:18 47:9 58:8,9 58:10 59:21 60:3 60:12 73:10 74:7 83:2 95:10 142:24 146:19 163:1,6 169:5 187:19 204:16 212:12 214:25 217:7 218:9 222:14 223:5,9,10,13 224:11 225:11 226:1,20,21 227:4 244:25 245:3 356:12 372:25 373:2 408:1 410:18,24 445:24 449:12 452:22 administration 157:2 224:14 225:1,5,8 359:6 378:8 380:18,20 444:6 admissible 141:22 142:5,11 adult 177:18 advent 107:20 advertisements 361:4 advise 324:22 advising 438:10 438:11 advisor 438:11 advisory 447:12 advocacy 213:9 advocate 444:7 affect 204:9 affiliated 219:22 affirmatively 19:2	affixed 459:6 461:15 462:21 affliction 251:12 aforesaid 458:12 afraid 131:17 afternoon 233:23 266:19,20 311:12 ag 432:19 age 16:24 198:11 agencies 64:6 169:16 200:1 319:6 445:21 agency 68:23 387:12 agents 364:9 aggregate 43:10 130:16 189:13,16 190:3 192:25 193:16 205:16 272:9 286:16 292:5 305:22 431:23 432:11,18 432:19,23 433:2,3 433:7 aggregated 441:25 aggressive 384:6 ago 223:14 246:16 253:20 349:8 agree 14:10 38:7 49:8 50:11 52:6 75:13 81:2 122:10 126:3,21 248:23 405:13 406:4,10 406:14 411:1 441:17 agreed 81:4 406:25 435:6 agreement 247:4 ahead 102:13 125:19 168:18 179:19 192:3
--	---	---	---

[ahead - apart]

Page 7

199:4 422:6 426:23 aid 3:8 16:2 124:15,21 398:11 416:8,12 air 53:1 134:4 akearse 2:8 akouba 2:10 akron 1:21 2:2 7:18,22 8:1,7 15:7 15:11,14,16 20:22 21:2 24:19 26:10 52:15,22 65:14 66:1,6,10 91:23 103:18 117:24 118:6 120:11 128:6,12 136:4,10 152:1 165:15,20 169:25 203:17 204:4,8,10,12,13 204:25 205:6,12 205:22,24 206:5 207:11 240:17 247:5,6 254:21 255:5 263:25 269:18 353:7 364:23 438:13 akron's 8:13 204:7 264:13 270:13 al 1:11,11 alan 398:21 alarm 193:5 437:17 alarming 260:1 351:22 albeit 110:22 alcohol 58:8 83:24 185:10,14 219:8 401:6 402:3 alcoholism 219:14	alexander 88:21 allegations 353:10 355:9 alleged 273:4,5 326:23 333:23 394:24 alleges 416:17 allen 409:1 allocated 201:2 202:11,14 allow 115:8 408:17 allowed 19:1 184:11 298:18 355:8 421:10 423:23 allowing 156:19 ama 409:21 amend 136:25 amended 7:3,23 8:2,7,13 22:3,7,13 23:18 128:7,13 136:5,11 264:1,14 269:18 270:14 amer 409:21 american 407:20 414:18 431:11 amerisourceberg... 4:19 amount 51:16 57:19 66:13 86:14 104:8 187:19,19 216:6 234:17,19 307:15 amounts 157:8 amplification 177:5 analgesics 51:2 analysis 121:17 122:21 130:11 293:3	analysts 151:9 analyze 440:13 analyzed 123:10 andrews 5:11 14:11 anecdotal 371:21 411:8 anecdotally 85:12 anesthesia 36:25 animalistic 55:3 animals 91:23,23 anne 2:4 8:5 15:5 182:3,17 annie 2:5 15:12 annual 7:9 55:18 61:10 148:22 207:10 answer 18:22 19:1 25:9 36:9,9,13 57:6 68:19 78:21 78:22 79:10,14 80:10 84:4 97:19 102:1 111:18 123:11 131:16,18 132:5 135:20 136:23 137:16 143:17 144:24 145:21 148:9 151:24 153:6 158:14 160:5 181:19 186:19 202:14 220:13 233:17 254:9,12 258:20 274:22 281:19 282:15 296:10 306:7 320:25 323:10 324:17 325:9 327:25 331:15 335:21 336:1 338:21 339:13	341:22 342:16,22 351:3,7 360:22 361:23 405:6 413:21 415:6 418:13 419:8 420:16 421:18 422:1,7 424:14 425:7,8,9 426:23 427:1,2,2,3 434:16 439:25 answered 205:2 296:7 321:7 329:5 343:10 351:6 371:9 399:21 414:14,17 answering 110:3 160:6 420:1,4,9 424:21 429:21,25 430:14 455:24 answers 158:24 191:13 194:5 324:10 349:25 430:14 anybody 80:4 104:12 106:14 121:13 151:13,25 152:14 155:22 156:6 163:10 164:4 166:9 168:10 182:10 210:22 212:20 231:13 276:9 349:10 373:1 455:16 anymore 44:9 93:23 208:5 261:16,16 443:5 444:14 anyway 109:8 apart 29:20 31:20 121:3,3,16 122:20
---	---	--	---

123:4 151:14 168:10 apologies 190:12 apparently 277:19 348:19 appear 461:11 462:15 appearance 125:13 182:12 appearances 2:1 3:1 4:1 5:1 6:3 438:18 appears 47:22 49:1 61:24 68:16 126:16 194:17 275:7 284:9 appended 462:11 462:18 applicable 457:7 application 49:4 applied 306:10 307:2,23 316:8,18 319:15,21 322:12 322:25 330:11 337:5 340:13 applies 345:20 apply 49:11 210:13 230:17 296:18 306:4 319:10 344:13,14 applying 323:6 325:20 appointed 438:17 appreciate 298:24 453:16 approached 239:14 appropriate 115:14 130:6 206:7 229:20,21 292:10 305:3	308:12 314:1,6 322:21 327:18 387:5,13,16 424:22 appropriately 105:21 334:20 approval 40:3 approved 359:9 359:17 369:21 426:9 430:7 433:14 approximately 14:14 49:2 83:19 288:6 408:7 446:11 arcos 120:12 121:17,25 122:22 123:4,7 127:18 129:23 130:1,10 133:4,12 134:5 135:2 149:21 151:5,14 152:2,16 153:4 168:23 272:15,17 area 129:7 130:5,8 170:12,13 310:4 346:21 358:13 areas 206:12,19 argued 196:15 argument 80:3 408:14 argumentative 412:20 413:3 421:21,23 424:16 arm 232:11 242:20 404:8 416:19 arms 58:18 arraignment 438:16	arrest 65:10,10 151:19 154:2,14 178:21 204:9,12 arrested 43:21,22 46:8 63:24 159:20 205:12 227:18 410:11 arrestees 159:5 arresting 150:6 arrests 64:6 65:7 165:24 221:23 arrows 380:3 article 73:25 74:17 74:19 75:14,15,16 376:7 409:18 412:24 415:5 articles 28:19,22 30:14 73:17 aside 33:25 114:23 268:16 291:17 333:16,23 374:6 asked 33:13 74:24 79:2,3,4 100:9 102:2,14 122:18 137:17 140:10 149:20 151:16,23 152:2,10 155:11 182:16 193:25 205:1 296:6 302:15 309:4 311:4 321:6 329:4 343:9 350:8 351:5 351:5 356:3,3,4 363:11 381:13 396:1 397:23 399:20 414:14,15 414:16 415:13 418:15,20 422:2,3 434:13 asking 34:6 57:18 79:1,21 92:15	94:25 95:1 112:19 113:10,12,15 120:22 130:25 136:20 155:7 179:2,3 182:20 194:13 197:3 229:13 282:17 285:16,17,18 302:16 311:25 322:16,19 334:9 343:13 360:2 382:10 383:12,19 393:7,7 397:13 406:20 414:3,25 417:20 422:5 asks 64:13 118:25 191:3 419:23 aspect 172:21 assembled 447:18 asserted 299:3 assertion 132:11 418:11 assessment 7:6 47:21 48:2 427:9 453:18 asset 28:24 assigned 48:18 149:11 203:7 215:7 232:17 assignment 461:2 462:2 463:2 assist 170:2 assistance 49:3 162:22 169:17 170:22 171:7 172:20 446:19 assistant 17:17 213:19 438:5 assisted 337:18 assists 150:22
---	--	---	---

[associated - back]

Page 9

associated 53:3,7 87:17 206:9 215:8 225:25 238:15 243:16 246:2,5 249:13 256:1 337:20 association 414:18 431:6,12 assume 18:3,8,20 29:10 52:22 63:25 96:2 114:24 138:4 148:19 157:20 214:2 235:15 236:7 249:5 293:21 294:17 303:18 324:22 408:12 assumed 271:15 assumption 83:23 324:20 444:12 assurance 330:1 athlete 241:7 attached 269:8 462:7 attaches 37:18 attaching 299:15 attachment 68:1,8 444:25 attachments 7:12 67:15,21 attended 379:18 attending 15:2 attention 93:21 95:3,8 176:8 193:11 199:19 203:15 207:17 232:5 233:7 236:17 272:24 274:1,6 280:2 282:25 314:16,23 316:25 329:9	330:22 331:9 335:1 336:15 339:7 362:18 379:20 387:1 attorney 27:20,25 257:15 258:17 272:10 298:17 299:24 412:2,3 426:5 437:12 459:2 attorneys 8:20,23 9:8 15:1 24:7 28:18 32:1 133:25 134:1 265:1,8,25 292:8 320:11 330:17 399:24 438:17 attracted 253:22 attracting 253:13 attributable 402:14 attribute 68:25 206:13,20 atty 8:4,5 9:1 182:3,4 265:12 auction 215:24 audience 380:24 381:9,11 audio 14:8 authorities 364:3 authority 150:6 364:19,24 365:3 authorize 462:11 authorized 180:14 autopsies 200:1 207:24 autopsy 96:1 337:1,11 availability 51:14 68:25 69:12,18 70:1,4,7,13,14	71:3 240:11 333:7 334:8 373:16 454:8,16 available 51:18,24 54:8,14 71:1 74:11,11 76:4 104:1,5 120:10 152:6,8 157:16 167:25 197:16 260:21 261:15,16 261:21 262:13,14 262:21 303:19 319:1 353:22 359:10 369:18 373:5 382:6 384:8 386:11 394:19 395:6 396:13 401:4 439:22 440:2 447:22 ave 460:1 avenue 2:15 3:5 394:13 avenues 362:12 average 234:17,18 234:21 awakened 248:5 awakening 158:1 aware 32:23 33:12 35:3 45:25 46:2 47:7 52:2,11,21 54:14 55:12 59:7 70:19 86:20 91:11 92:15 108:24 109:1 112:18 119:24 122:25 123:5 145:2,7 146:25 169:14 171:4 172:3,24 173:1 209:10 214:13 253:5 263:7 276:10	277:3 279:20,21 285:8 294:2,6,7,11 309:23 316:19 318:6 319:16 350:15 353:9,16 353:19 356:21 357:5 362:21 363:3,10 373:13 391:23 395:14 406:18 416:15 445:22 awareness 57:24 58:6 141:3 awkward 344:3
b			
b 1:17 7:3 8:10 22:8,13 87:18 145:9 186:25 206:2,7 225:21,24 226:8 229:22 251:15 264:6 295:18 298:2,11 335:6,22 336:18 336:22 337:5,19 338:14 343:14 345:11 346:14 347:20 359:24 370:9 415:9 426:6 433:13 460:8 461:4,9 462:4,13 463:20 babies 44:21 47:14 196:18 215:6 231:6 257:17 258:24 back 30:16 33:1 52:24 54:2 55:17 73:16 74:15,15 75:6,9 78:5 83:2 95:1 117:7,9,9 131:3 167:1,1			

190:5 192:12 195:1 197:12 198:14 205:17 211:11 220:15 222:23 236:2 237:9 239:25 240:3 244:7,18 245:8,24 261:8 267:22 300:24,25 326:13 329:9 335:1 353:13 371:2 387:18 393:14 404:2 422:24,25 423:6 428:4,7 442:5 453:18 460:15 backs 75:19 bad 102:7 112:19 114:18 248:11 396:5 423:8,13 badgering 429:21 bag 44:10 172:7 bags 172:1 baker 4:13 16:16 24:20 26:13 48:13 49:14,22 50:16 52:25 149:6,8 152:15 163:23 166:2 169:20 427:22 428:3 453:17 baker's 26:1 48:15 56:3 427:8 bakerlaw.com 4:17,18 bank 216:6,7 bar 20:18 409:2,9 barberton 66:10 231:3 247:3 barker's 26:1 218:23	barnes 26:1 259:14 400:9,12 402:18 403:2 based 73:6 102:7 120:9 121:24 123:7 129:22 130:10 254:7 278:19 320:2 329:16,20 340:16 341:6 343:1 345:23 375:22 409:11 411:10,10 411:12 412:13,14 431:22 bases 412:23 414:9 basic 18:3 236:7 basis 35:6 72:24 130:9 274:25 415:1 417:17 418:1,11 441:14 bates 389:3,4 bathroom 157:23 bearing 343:14 beat 422:5 beaten 258:4 beating 426:21 becoming 45:10 45:11 54:8,13 98:14 306:17 438:17 bed 229:9 262:1 362:12 365:11 451:11,17 beds 175:25 240:6 began 35:8 44:2 44:16 53:16 60:13 107:24 140:11 141:3 187:17 259:7,12 362:23 450:19	beginning 32:21 52:11 125:8 158:1 221:25 237:6 begins 283:10 behalf 2:2,12,18 3:2,8,13 4:2,11,19 5:2 15:6,9,13,16 15:19,21,23,25 16:2,4,7,9,14,16 23:4 33:3 125:15 212:25 332:20 349:5 350:3 353:6 367:2,5 376:19 385:1 392:22 398:12 434:18 behavior 58:14 111:8 143:23 246:21 248:7 bel 427:25 belief 129:4 351:25 376:14 believe 22:16 24:9 31:6 32:19 36:19 37:25 43:15 60:22 67:3 68:6,10 70:2 71:7 76:10 82:21 89:16 99:13 110:5 119:17 121:18 122:8 124:15 126:10 127:17 129:15,25 133:15 137:1 142:18 144:11 145:9,12 148:11 156:8,23 161:10 162:4,17 164:13 167:16 169:13 173:4,22 174:8 175:7 183:1 222:6,7 242:14 254:3 255:13 259:6,11,13	271:14 278:7,10 278:11 280:19 281:13 290:6,13 297:1,4 298:17 299:22 300:16 312:11 315:23 316:22 334:23 337:8 353:23 357:1,4 358:20 367:21 370:7 372:16 373:18,18 375:9,14 376:7,20 377:4 378:3,6 381:19 385:17,19 402:18 406:12 407:10,13,15,21 409:20 414:19 416:2 418:23 419:24 420:18 421:14,17,24 422:15 427:25 431:3,8,9,10 433:8 436:10,13 439:7 440:3,14 444:24 446:22 452:23 453:2,11 believed 122:5 129:19 132:8 422:13 424:5 believer 29:15 208:11 believes 129:4 180:19 believing 78:21 bell 193:5 bellwether 274:8 274:11 326:19,21 329:21 335:7 beneficial 39:22 225:3
--	--	--	---

benefit 203:1	300:20 314:17	bonds 438:17	breath 136:21
benefits 39:25	349:21 350:22	border 92:17	452:11
best 25:6 28:24	366:16 436:6	borders 364:16	breathing 348:19
30:22 156:19	442:15	365:4	bressi 109:2 145:3
162:14 165:5	blame 175:10	born 44:21 47:14	145:8,10,18 146:6
228:9 243:10	351:14	215:6 257:17	brian 27:5 87:17
296:9 430:1	blaming 106:10	bornstein 241:6	88:6 144:4 186:24
436:18	395:20	241:24	187:8 188:10
better 44:25 100:1	blank 85:1	bottle 102:16	193:13 219:20
102:18,22 117:13	blanket 179:10	260:19 337:24	220:12 225:22
153:25 155:5	180:13	338:9	226:6,19 229:14
157:18,19 162:19	blanketed 353:4	bottom 62:8	brickell 2:14,15
167:22 181:16	bleeding 221:11	190:25 221:14	bridgeside 2:6
216:18 219:20	bleeds 329:12	256:25 272:25	brief 354:14
253:18 257:20	block 26:2,17 32:4	299:21 379:24	briefly 151:6
294:20 304:20	blocks 32:5	387:21,22	266:22
375:2 392:21	blood 338:1	bought 86:18	bright 114:11,20
413:15 418:13	bloom 44:25	boulder 156:25	bring 176:2
451:25 452:8,14	board 26:12 47:9	boulevard 2:6	193:11 446:23
beyond 120:4	58:10 59:21 60:12	bounce 366:16	bringing 31:11
136:1 139:18	107:19 115:25,25	boundaries 119:1	46:5
181:18,19 196:8	116:1,12,13,20,21	box 103:16 244:2	broad 210:12
243:22 245:9	116:21 117:1,3,3	244:5	380:24
257:4 274:20	117:18,20 146:19	boxes 244:13	broader 157:15
281:25 322:6	162:22,23 163:1,2	263:18 380:3	381:9,11
323:19 324:14	163:11,17 196:20	385:8	brother 260:3
328:5 363:9	214:25 216:4	boy 178:4	brotherhood
372:11	217:7 223:5,9,10	brad 26:6 115:21	217:21 227:6
biennium 225:16	223:13 224:11	381:19	brought 89:16
big 29:14 104:2	225:12 226:1,20	brain 74:8 198:10	94:23 259:10
156:25 162:7	226:21 356:12	304:6	262:11 322:1
368:15 435:16	408:1 431:7	brains 37:18	446:15
436:21 449:17	447:12 452:22	breached 416:24	buckets 442:6
bill 452:5	boards 211:18,25	break 67:6 74:7	budget 24:16 27:8
billion 186:10	212:24	178:15 181:21	221:16 223:16
binder 74:21	bob 27:19	191:19 236:25	225:16,24,25
bit 30:6 50:14 80:9	bockius 3:9,15 5:5	243:7 269:11	226:3,8,15,15,18
88:1,1 149:15	bodies 45:2	311:11 313:1,10	259:17
168:23 172:13	body 241:10	314:17 348:22	budgeted 225:17
258:25 284:24	bogged 301:2	366:1,8 397:2	budgets 225:22
288:23 289:1		403:8 440:9	226:7 229:22

[build - case]

Page 12

build 239:13 392:8	394:20	284:20 286:3	216:17,23,25
building 170:5	buying 256:21	287:17 289:13	217:2,14,14,20
215:23 239:16	bwc 393:17	293:14 300:22	218:8,10,14,17
built 451:17	c	301:14,18,19	223:1,2 226:21,21
bulb 368:12	c 239:5,20	302:6,13,20 303:5	227:10 228:9,16
449:17	ca 460:25	303:10,15,23	228:17 229:1
bulk 157:7	cabinet 102:19	304:3,10,18,23	230:4,5,8 231:14
bullet 191:8 194:6	cadre 403:1	306:5,13,23 308:9	231:15 236:20
196:16 202:3	calculated 188:7	311:18 312:12	258:23 259:3,18
211:1,5 214:16	california 4:5	316:7 317:6,13,24	308:9,9 385:15
216:20 220:17	call 56:1 115:11	318:12,21 319:3	386:13,20 388:6
222:24 228:18	133:16 156:4	327:11,13,16,19	388:18 389:14,19
230:3 233:9 235:6	166:1 188:2 198:1	327:20 328:5,13	449:5,7
237:14,25 238:17	209:5 224:18	capacity 154:24	careful 232:24
238:22 243:9,13	228:24 230:8	165:21 200:5,14	carefully 395:20
243:14 255:25	246:11 248:17	235:22 246:7	caremark 278:2,3
258:22	259:9,9 290:15	397:23 447:14,15	caresource 276:6
bullets 387:3	329:21 330:10,14	451:11,15	277:25 278:3,5
burden 246:3	330:19 341:12	capita 350:20	291:12 303:17
burdens 122:16	394:9 446:24	capital 192:15	325:1,12
bureau 165:22	448:6	194:7 197:25	carfentanil 38:21
259:7 400:14	called 16:24 98:5	376:4 432:10	42:23 72:8,15,20
burglaries 53:8	111:5 141:23	capitol 381:2	74:14 81:7,12,16
burglarized	142:2 170:1 239:7	captain 48:12,15	81:20 84:19 85:2
199:12	239:11 307:10	48:16,17 49:14,22	85:24 91:12,15,17
buried 427:18	428:12 448:11,18	50:16 52:25 56:3	91:21,24 94:15
442:25 443:9,12	calling 47:6	61:25 62:5 82:21	233:4
burling 4:3,7 16:7	calls 203:25	166:16 218:22,23	carmen 166:12
16:9	250:14 261:5	427:8,22 428:3	carnage 419:14
business 93:3,8	301:20 309:24	453:17	carole 4:14 16:15
250:22 253:6	310:2 312:22	caption 14:19	carolina 2:7
254:25 255:1	321:7 341:8	458:21	carried 444:16
446:5	424:17	capture 253:9	carrier 278:1
businesses 92:22	campaign 141:3	car 159:1 199:12	carries 390:9
193:6 250:14	196:25	carbon 172:10	carry 171:25
253:6	campaigns 196:22	cardinal 2:18	carrying 444:11
busy 93:1 199:20	campus 231:3	15:21 170:25	cartels 92:8,11
251:15 362:10,11	239:21	172:5	case 1:7,11 14:19
butter 141:24	canada 111:17,23	care 98:17 194:9	14:21,23 21:25
buy 86:2,9,17	cancer 83:6	196:17 211:7,8	24:11,15 31:3,15
198:8 248:14	130:19 283:16	214:18,19 215:9	41:10 52:18 55:7

[case - certified]

Page 13

89:22,23 97:17 114:4 142:3 152:9 179:10 192:1,8,19 194:16 196:14 204:3,11,24 205:5 260:1 272:7 276:16 281:9,17 294:4 297:24 321:24 326:12 338:18 341:7 376:6 399:24 432:2 441:14,14 460:6 461:3 462:3 cases 20:24 21:2,4 28:7 45:17 46:4,5 46:7,11,24 52:18 53:21 54:4,19 55:14 60:3 63:11 63:16 90:2 93:1 97:18 140:14 147:18 150:8 151:22 153:1,10 153:13 170:5 199:7,10 200:18 200:19 208:14 209:8 221:1,5,6 246:17,17,19 396:19 408:8 438:9,15 caseworker 159:9 caseworkers 175:25 215:7 227:15 246:25 cash 139:13,16 casualties 177:23 catch 207:13 208:25 catching 207:16 categories 69:7 191:3,9 238:6 449:2	category 138:19 138:20 156:7 203:4 238:11 243:22 244:23 245:8,13 249:25 250:8 253:3 257:12 cause 47:18 84:8 107:25 181:1 333:22 334:10,19 383:13,15,16 384:3,13,15,20 385:6 390:8 391:3 415:23 416:5 419:11,15 420:15 420:15,17 421:14 421:15 437:2 458:12 caused 43:10 91:13 117:11 189:14 192:21 194:10 197:15 207:14 220:21 305:22 352:9 357:20 358:4 360:14 365:5 368:5 390:17,22 418:23 419:24 421:24 424:5,6,20 causes 333:15 334:4,6 420:16 425:16 causing 95:2 cdc 290:12 294:16 295:9,22 307:4,8,9 321:8 cdc's 290:8,13 cell 14:6 center 217:22 227:7,17 239:8 257:24	centered 215:21 352:11 centering 231:2 centers 239:4 centre 3:16 cephalon 3:13 5:2 certain 33:4 100:22 130:18 140:6 160:18 184:9 196:4,10 208:13 220:4 251:6 279:11,14 309:22 310:5 312:23 324:2 335:6 393:20 401:1 415:9 417:6 453:7 certainly 32:22 34:13 43:19 45:12 50:23 53:15 57:9 57:15,24 63:11 65:13 66:9 70:3 70:20,24 71:7 75:7,12 77:22 78:7 80:3 81:1 82:22,22 83:24 84:14 87:9 89:8 89:12 97:13 99:6 99:22 102:20 106:23 111:6,9,25 116:7 121:22 135:25 138:14 141:18,22 147:3,6 147:17,20 155:24 157:20 158:3,21 161:11 164:10 165:4,25 169:19 173:17 179:6 184:24 185:1,7 192:16 193:13 200:19 201:5	202:22 204:7,19 205:15 207:9 212:10,22 213:9 214:25 216:16 218:15 221:15 222:21 228:12,25 229:7,16 230:13 230:15 234:12 236:20 240:9 244:13 246:23 249:12 256:24 257:1 262:20 290:15 305:1,6 308:8,18 309:25 310:18,20 312:8 312:10,13,21 328:9,19 332:19 332:24 337:24 338:10 341:1,11 341:18 342:25 349:22 364:9,23 369:3 385:9 387:15 391:16 393:21 394:7,10 402:16 403:20 405:8 414:21 419:14 420:20 422:25 425:19 429:3 434:11 435:10 440:3 441:21 443:1 448:1,6 453:12 certificate 6:12 458:1 462:11 certification 234:10,14 461:1 462:1 certifications 208:10 certified 17:2 220:6
---	---	---	---

[certify - cocaine]

Page 14

certify 458:8,19 459:1 cetera 449:3 chad 26:11 chain 7:11 67:19 423:14 chains 417:15 champion 443:5 443:10 chance 290:9 413:25 change 47:8 54:17 68:24 141:7 142:7 156:18 157:24 162:7 198:10 246:23 247:25 249:10 262:12 306:16 380:18 381:8 460:13,14 462:8 463:3 changed 141:8 142:12 143:23 144:1 153:24 167:18 181:15 207:19 221:16 333:19 347:5 380:20 451:22 changes 92:7 142:22 156:13,16 206:11,19,24 376:10 382:24 383:8,12,22 384:5 404:9 440:1 444:5 460:12 461:7 462:7,9 changing 157:7 442:14 char 406:9 413:1 characterization 50:20 89:6	characterize 89:17 413:13,14 414:23 429:14 characterized 392:17,18 charge 62:5 charges 255:5 charging 438:13 chart 439:16 charts 148:24 cheaper 394:19 check 60:23 248:9 248:11 378:6 chemical 284:22 chicago 3:10 5:7 chief 17:17 27:16 27:22 187:5 213:19 438:6 child 104:4 196:16 242:15 258:23 259:2,23 260:5,6 352:13 358:18 368:14 369:1 412:5 children 193:24 196:18 228:23 229:2 258:24 children's 187:22 196:20 197:2 238:14 257:17 259:7 400:14 402:22 403:4 china 90:16,21 choices 60:19 choose 84:24 choosing 425:24 chose 449:22 450:6 chosen 307:22 christopher 2:14 15:18	chronic 305:2 306:20 326:20 327:5,7 333:10 369:12 circle 379:25 455:5 circumstance 313:20 circumstances 313:24 314:4 citizens 175:8 city 2:2 7:18,22 8:1,6,11,13 15:7 15:10,13,16 20:22 21:2,22 27:1 65:14,25 117:24 118:6 120:10 128:6,12 136:4,10 203:17 204:4,10 204:12,24 205:6 205:12 206:4 263:25 264:11,13 269:18 270:11,13 353:6 364:23 citycenter 4:8 civil 17:1 19:12 21:18 457:3,7 461:5 462:5 claim 411:12 claiming 411:16 claims 191:25 192:7 276:8 303:18 390:12 450:2 clarify 55:21 66:25 class 153:20 196:3 251:4,5 classification 251:7	classified 180:10 classify 81:8 84:5 clean 289:4 cleanup 249:14 clear 23:25 80:8 183:22 267:15 344:17 413:8 clearance 207:18 clearly 340:24 clergy 446:6 449:14 cleveland 3:5 4:16 8:12 27:3 264:11 270:12 459:7 460:2 clever 99:15 cliche 451:6 client 398:13 431:7 clients 414:25,25 clinical 382:25 383:9,23 384:5 clinicians 381:21 381:22 clomax 2:16 close 28:23 34:12 35:12 83:17 290:16 403:11 409:2 416:1 455:4 455:6 closed 248:11 closely 44:3 119:19 closing 215:22 coaches 220:5,10 233:12 234:9,11 234:16 coaching 220:3 cocaine 38:23 42:25 43:5 63:5 82:10 83:22 84:25
--	--	---	---

[cocaine - community]

Page 15

85:9 86:18 90:23 91:5 92:13 93:5,9 93:11,17,24 99:13 147:18 219:14 230:20 249:3 259:22 401:6 402:3 code 21:11 175:1 cohen 7:21 9:2 118:3,11 265:13 267:17,21 281:3,5 281:16 282:13 347:8 349:7 397:15 cohen's 268:8 269:6 366:21 coincidental 340:18,23 cold 195:11 coleman 4:14 colleague 267:5 455:5 colleagues 59:3 237:19 263:16 266:25 397:12 collect 254:20 collection 235:1 296:18 collective 368:11 396:8,22 432:5,6 436:25 451:8 452:11 collectively 278:23 college 34:14 35:8 35:10,22 241:7 399:2,3,9,12 colored 385:8 combat 117:19 157:11 162:24 169:1,12 173:6 211:20	combatting 169:17 170:23 combination 320:4 combined 314:12 come 32:6 38:17 43:17 54:21 58:6 72:21 73:24 92:16 95:12 122:22 130:17 131:10 134:10 145:4 158:20 159:11 160:8,18 164:10 186:15 189:8 194:4,25 205:16 236:2 239:12 245:22 255:15 277:13 307:18 308:11 349:17 367:25 369:22 391:11 401:13 403:1 404:2 405:18 406:19 410:9 419:13 432:20 439:9 446:7 comes 42:12 76:15 82:19 132:20 147:10 158:15 204:13 217:23 251:13 260:19 369:20 400:17 401:25 407:18 417:5 comfortable 160:6 189:15 301:4 348:9 418:17 420:6 coming 47:11 73:22 78:5 94:20 131:2,3 139:18	177:23 201:23 205:12 258:10 321:16 353:3 374:3 432:2 448:7 commander 82:6 comment 402:16 commercial 51:20 commission 9:16 212:25 377:2,8,14 385:14,22 386:13 386:24 388:12,14 388:17 389:8,13 389:18 459:17 461:19 462:25 463:25 commission's 386:19 commissioned 458:8 commissioner 410:24 commissions 211:18,25 commit 408:15 committed 99:16 99:20 135:24 246:20 248:8,9 committee 445:5 445:12 committees 19:14 common 21:3 60:7 96:25 185:2 204:14,15 246:13 246:25 247:12 351:10 362:16 368:20 389:15 commonly 224:22 246:14 communications 27:14	communities 63:21 154:22 250:4 254:23,25 448:3 450:15 community 28:6 28:21 30:23 31:1 31:21 35:22 37:23 42:8,24 43:12,15 45:13,20 52:12 53:19 55:11 58:1 58:25 75:13 82:18 94:20 95:14 96:18 102:18 107:23 144:12 160:13 173:18 174:17 177:5 179:12,13 180:19 190:3 192:24 193:19,22 194:3,8,11 195:14 195:15 198:3,23 202:19 208:22,23 212:4 217:22 227:7 229:17 239:8 240:15 241:12 248:17 250:11,22 251:12 257:24 261:9 263:12 305:24 309:25 333:12 334:8,12 349:18 350:21 352:2 353:4 358:10 363:10 368:10 369:15 374:2,5 375:19 376:4 384:8,25 391:8 393:2 395:23 396:2,23 400:2 404:10,11 405:15 408:15 413:15 414:24 432:8
--	--	---	---

[community - continued]

Page 16

433:8 446:3 447:18 448:2,7 449:13 451:8 companies 324:25 365:19 compare 321:13 compared 65:21 compassion 195:4 compel 9:3 265:16 compiled 359:2 complain 362:6 complaint 31:2 32:23 41:20 42:4 250:16 326:23 353:5,9 416:17 418:8,9 431:9,11 complaints 346:17 346:23 350:12 351:1 354:25 361:20 completed 232:14 458:22 460:15 completely 149:21 283:4 287:11 complex 392:15 392:18 compliance 9:4 265:17 comply 144:16 305:19 419:16 comport 144:10 294:20 compound 91:10 compromise 288:3 con 367:15 concentrated 228:5 concern 250:22 351:20,22 352:9 358:5 360:14 365:5,17 368:5	451:13 concerned 157:3 361:10,20 concerning 120:11 206:11,18 concerns 47:17 288:4 346:17,23 350:12 351:1,16 354:4,25 356:22 357:1,20 366:10 367:17 concluded 456:1,8 concludes 456:6 conclusion 322:2 362:15 375:24 396:8 442:16 conclusive 51:16 conditions 40:11 40:24 304:23 conducive 29:18 conduct 333:16 conducted 148:1 confident 90:1 121:8,23 212:24 confidential 8:18 8:21 9:6,9 264:23 265:5,22 266:4 confirm 54:16 55:13 182:21 276:18 293:18 302:19 303:14,21 319:2 329:2 332:8 366:17 371:10 confirmed 267:9 conflicting 226:5 confusing 357:25 confusion 288:21 conjunction 43:6 91:7 272:13 373:2 connected 381:2	connection 171:7 355:9 363:25 371:20 376:15,17 381:5 394:23 395:14 396:14 431:18 connects 376:22 connolly 2:19 15:21 consensus 320:3 322:6 326:11 consider 146:2 187:15 189:21 217:2,19 320:6,17 321:2 388:18 considerably 64:23 consideration 451:1 considered 38:12 90:5 97:20 252:1 253:7 320:15 388:5 389:9 consistently 403:25 conspiracy 376:1 constituents 176:9 consultation 292:7 297:24 298:20 consulting 307:4 consumed 161:19 161:21,22 consumer 357:8 357:15 consumers 78:19 358:12 446:12 449:9 consumes 97:9 contact 158:20,21 159:9,11 160:8 172:25 173:2	194:1 217:23 362:5 364:2 391:11 399:5 400:18 401:13,19 401:25 406:19 410:9 contacted 166:8 277:15 contacting 341:18 contained 132:13 272:1 277:20 296:25 contend 274:11 304:1,8,17,22 305:12 308:13 314:8 326:19 329:22 332:10 333:1 387:15 contended 374:8 contending 313:17 contends 305:7 312:7 328:17 contention 130:14 272:5 292:2 305:20,21 308:1 309:5 327:4 328:11 332:19 context 25:7 31:12 372:10 contingency 354:19 continuation 365:10 continue 14:9 285:2 291:10 292:3 313:15 317:16 328:8 346:5 348:16 continued 3:1 4:1 5:1 54:5 342:9
---	--	---	---

continues 45:23 51:2 83:24 140:20 330:2,6 331:18 419:15 continuing 58:21 245:20 287:23 387:17 contract 218:4,9 276:1 contracted 134:11 135:3 contracts 217:20 218:7,9 219:1,16 219:18 227:2 319:6 contribute 429:4 429:11,13,15 430:13,16 454:7 contributed 418:25 419:4,9,20 419:25 420:6,23 421:17,24 422:13 422:18 423:2,4 424:5,9,21,25 425:3,11,13,15 426:8,11 427:3 428:24 430:7 contributing 377:15 383:10,18 383:23 384:1,11 384:12,15 385:2,4 390:4,8 392:24 393:1,8,11 395:11 418:15 425:16,22 contributions 383:3 control 354:19 controlled 69:17 70:8,13 129:5,19 184:3,5,15 442:8 442:11 454:8,16	454:21 convene 446:4 convened 354:8 convening 362:2 conversation 94:7 175:5 243:6,7 280:1 320:10 351:9 356:10 362:3 369:1 372:6 372:21 418:3,7 446:8 451:21 conversations 14:5 28:6 29:2 149:7 298:18 349:22 352:10 418:5,10 434:11 434:19,23,25 convicted 107:2 137:10,14 144:19 145:18 340:24 343:19 conviction 159:8 252:22 cooperation 114:6 155:17 coordinate 212:1 cop 23:15 copied 281:17 copies 61:18,20 copley 17:11 copy 270:4,24 379:6 corner 389:1 corners 179:24 corporate 285:21 297:16 298:13 397:24 403:15 406:22 419:2,17 420:2,8 421:10 422:9 423:24 424:23 426:9	433:17 corporation 4:2 4:20 correct 19:16 23:13 33:4 35:1 40:1,11,24 41:2,7 41:8,14,18,19 51:7 51:13 52:1,9 55:8 56:10 57:20 59:8 61:4 65:1 68:12 68:13 69:24 70:18 71:23 72:3 76:23 77:2,3 81:7,12,22 82:13 85:6,10,25 86:4,5,12,20,21,25 88:22 89:4 90:16 90:24 92:2,9 94:11 95:5,19 98:3 101:11,25 103:21,22 104:9 104:10,25 105:1,4 105:5,8,25 107:9 107:10 108:3,12 109:8,16 111:2,12 112:3,12 115:16 122:13 124:24 129:11 133:1,7 134:22 138:5 142:6 144:20,21 146:24 156:11 158:5,7 170:8,9,14 183:16 184:3,7,8 184:12,13,17,21 188:4 205:9 209:9 213:3,23 219:7 224:1 225:9 242:22 252:2,16 255:5 273:6,7,19 276:12 285:7 289:17 290:6 294:1 301:11,15	307:6 311:23 313:22 314:6,7,14 314:21 327:21 339:20 346:15 353:15 373:14 378:4 399:6 403:9 403:12,13 408:17 409:6 412:23 416:8 418:17,19 423:25 427:4,24 428:10 434:22 438:24,25 439:4,5 439:22 440:19 441:8 444:2 449:24 450:7 453:9 458:17 corrections 460:12 462:17 correctly 274:15 283:20 317:9 326:24 330:7 331:22 349:7 388:8 447:25 corresponds 89:8 corruption 21:9 cost 186:3,13 196:16,22 200:2 215:1 222:22 247:19 249:25 256:1 costs 87:16 88:5 176:3 187:13,23 194:23 195:2 196:24 206:8 211:7 214:18,23 215:8 216:22 217:13 223:1 225:25 226:21 228:15,16 229:24 230:1 231:20 237:25 238:14
---	--	--	--

[costs - county]

Page 18

243:16 246:2	count 171:13	128:6,12 136:4,10	253:24 254:20,21
249:13 257:7,25	439:7	137:10 139:24	255:1,6,12 256:18
258:6,7,8,9,23	counterfeit 263:3	142:25 145:24	259:21 261:4,18
259:18 260:7	counties 207:25	146:9 147:1,2,5,10	261:22 262:9
coun 298:1	208:1 255:9 363:5	147:11,14,25	263:2,25 264:12
council 364:22	countless 211:24	148:3,4,13 149:10	264:12 266:11
446:4 450:16	country 208:13	149:19 150:12	269:18 270:12,12
counsel 14:18 75:3	county 1:11 2:3	151:13 152:1	273:4,9 278:6,16
87:14 110:2	7:4,6,18,22 8:1,6	154:21 158:15	285:22 295:1
121:23 123:9	8:12,12 9:11 15:6	160:15 161:5,18	296:4,11 304:8,21
127:12 155:11	15:10,13,17 17:14	161:20 162:13,21	305:7,12,21,21
229:12 237:18	20:16,20 21:3	163:17 164:4,20	310:15,17,20
267:19,22 268:17	22:8,14 23:3	164:21,24 165:1	312:7,14 313:16
269:4,12 271:10	24:21 25:1,4	166:12,13,15,22	314:5,8 323:7
271:13 272:14	26:14,18,23,25	168:4,10,25	328:17 330:10
274:23 276:3	27:4,15,20,22,24	169:11,16,25	332:10,21 333:1
277:21 278:20,23	28:1 33:2,8,20	170:7,21 171:2,5	333:14,21 334:3
279:7 280:1	42:3,16 44:5 45:2	172:1,18 174:15	336:21 349:5
281:17 286:21	45:18 47:4,10,22	175:2,19 177:12	350:3,5,11,14
297:12,13,23	48:2,18,19,22 51:2	177:16,19 179:13	351:1,16,23 352:8
298:7,16 299:3	51:19 52:8 53:8	186:1,13 191:25	352:25 353:6,16
310:12 318:15	53:10 54:15 55:17	192:7,19 193:4	353:24,25 354:10
319:9 322:4,7,14	55:18 58:10 60:9	194:15 196:13	354:11,25 355:7
322:23 323:18	62:6 63:12,13,16	197:24 198:16,19	355:12,17 356:13
324:7,16,22	63:21 64:4 65:5,6	200:21 203:10,23	357:20,20 358:3,4
326:11 328:19	66:2,3 70:2 71:21	204:3,8,9,11,14,22	358:4,19,23 359:2
340:17 345:9	72:21 73:8 74:2	204:23 205:8,13	360:11 361:10,19
347:3 349:11,22	75:17 77:20 80:17	205:22,24 206:5	361:22 362:5,19
359:23 363:22	81:17 82:8,17	206:11,18 208:4	362:25 363:9,11
370:8 379:9 418:5	83:3,11 84:11	209:24 210:3,9	363:14,16,24
418:7,10 419:8,22	86:7 87:6 88:22	212:8,12,21,25	364:2,13,22,22
422:2,23 424:12	89:8,11,14,18 90:4	213:3,4 214:10,23	365:1,4,5,16,19
426:15 427:20	90:21 91:14 92:2	215:12,19 216:1,4	366:20 367:2,6,14
429:20 455:20,25	93:10 100:24	217:13,20 218:3	367:17 368:5,18
457:1,10 459:2	102:21 104:4	218:14 239:1,4,6	369:5 371:25
counsel's 273:20	105:10 106:21	239:15 240:9	372:19 373:12,15
counseling 231:12	108:7,18,23	244:1,20,22 247:8	373:17 374:7,9
238:2 239:4	111:17,24 112:20	247:12,18,20,21	376:19 377:13
counselor 61:18	115:6,24 117:24	249:6,17,21 250:9	379:17 384:4
206:1	118:6 120:10	250:15,17 251:17	385:2 390:7,16
	121:18 122:25	251:23 253:7,16	392:14,23 394:23

[county - criteria]

Page 19

395:3,13 396:12 397:18,24 399:16 400:14 403:16,17 405:2 406:23 407:25 408:3 413:18 415:24 419:3,18 420:3,8 423:25 424:23 428:14 429:10 430:17 431:21 433:6 434:2,4,8 435:1 438:24 439:8,21 440:25 441:23 445:13 446:3,13 447:1 448:3,12,19,24 449:21 450:18 453:19 454:3 458:4 461:10 462:15 county's 76:4 141:14 272:5 289:4,7 328:22 365:17 366:9 434:18 countywide 65:15 187:18 188:3 couple 23:19 30:14 32:12 64:8 100:24 102:18 108:19 109:12 154:1 186:6 233:23 255:25 275:7 436:11 coupled 135:2 course 38:11 233:21,22 288:19 314:3 434:20 453:1 courses 54:9 246:16	court 1:1 6:15 14:22 16:20 141:23 142:2 154:25 164:13 187:15 204:13,14 204:16,16 209:17 210:15 215:5 217:24 246:11,12 246:12,13,14,17 246:25 247:3,3,4 247:11,12,18 249:6,8 326:4 410:14,23 438:13 438:16 461:7 court's 120:11 courthouse 103:15 courtrooms 438:19 courts 154:19,24 159:7 200:10,14 210:9 227:20 246:4,6 247:2 410:13 cov.com 4:6,10 cover 33:16 61:25 211:5 219:5 246:19 423:18 coverage 278:4,5 covered 163:22 210:25 230:2 235:5 243:5,8 325:8 418:23 422:4 424:6 covington 4:3,7 16:7,9 crack 46:5 99:12 179:24 259:21 crafted 395:21 craig 372:25 443:4 craig's 373:25	create 153:18 173:7,10 175:6 236:20 239:8 240:11 326:3 337:2 442:6 created 35:22 44:11,11 45:12 72:11,22 74:12,13 94:19,23 123:15 134:4 192:23 196:3 213:20 248:15 251:5 257:8 258:15 262:10 297:9,13 297:15 305:23 340:16 391:10 392:20 394:13 396:15 447:6 creating 117:10 251:4 creative 255:4 crendon 4:17 cri 277:1 crime 56:14,17,18 56:23 64:23 66:14 96:20,23 101:18 111:10 144:15 207:5,13,15 232:9 232:15 235:24 248:18 408:15 crimes 53:3,16 56:5 64:15 65:11 137:10,14 340:25 criminal 7:9 19:12 51:24 53:6 54:25 56:23,25,25 59:10 59:24 61:2,9 87:6 111:1 121:9 142:2 150:25 153:22 155:3,3 157:4,9 213:8 217:25	221:1 447:11 criminalized 117:7 criminalizing 154:7 248:6 criminally 140:2,5 crises 42:9,15 crisis 28:20 41:23 42:7,8 84:12,15 87:10 94:5 173:19 175:15 176:17 202:2 224:8 253:8 253:17,24 255:13 321:21 362:13 392:15,24 394:2,6 395:22 398:17 402:23 413:9 415:23 418:25 419:5,21,25 421:18,25 422:14 422:19 424:6,10 425:4,11 428:25 429:5,11 430:16 430:20,23 447:6 crit 316:15 criter 289:21 criteria 132:3 267:25 274:22 275:1 279:3,15,17 284:13,16 287:16 289:11,24 290:3,7 290:11 292:17,23 293:3,6,14,24 294:5,9 295:24 296:17 297:7 298:3 299:5 300:2 300:20,22 301:5 301:12,16 306:1,4 306:10 307:1 311:6,7,20 312:2,4 313:10 314:12
--	--	---	--

[criteria - death]

Page 20

316:2,8,17,23	cycle 225:18,19	146:23 162:23	175:22 177:18
317:11,18 318:10	d	163:3,6 164:15	193:20 215:2
318:18 319:10,15	d 4:4,21 170:10	166:25 169:4	257:25 307:8
319:19,21,25	d.c. 2:20 4:9	272:17,19 277:16	308:15 309:9
320:2,7,18 322:10	dad 260:13	291:9,13 296:19	319:19,20 345:21
322:11,15,17,18	daily 163:8 283:18	302:1 303:12	392:7 398:16
322:25 323:3,4,7	287:18 288:7	322:4 325:23	410:10,23,25
323:20 324:2,6	289:15 308:2,6	358:24 359:1,3	412:11 444:1
325:21 326:6	311:21	373:15 410:17	452:2,3 459:7
327:14,20 328:13	damages 87:16	439:9,10,13,20	461:16 462:22
330:11,20 331:24	186:24 192:19,21	440:16,18 441:4,6	463:22
336:20 337:3	194:15 196:14	441:6,15,16,18,24	days 102:25
340:13 342:17,19	204:3,23 205:4,9	441:25 442:4	152:24 210:23
343:5,11 345:11	229:22	443:16	244:7,14,18 245:8
355:19 431:19	dan 1:8 239:12	database 151:12	245:24 354:16,23
criterion 122:17	240:24 241:23	168:24 169:10	442:21 443:20,23
130:19,25 275:20	dan's 241:15	440:12,18	444:1 460:18
279:10 284:18	dance 18:8	databases 169:3	dd 216:2,3,4
286:3,21 292:10	danger 215:22	date 14:13 22:22	dea 40:7 149:12
297:1,11 302:14	232:25 233:2	45:5 298:10	151:9 169:19,22
316:5,12,15	290:15 307:11	457:11 460:8	184:17 244:13
317:15,15 318:4	353:25	461:3,9,19 462:3	364:9 434:13
322:5 326:2	dangerous 21:8	462:13,25 463:20	450:1
330:16 340:16	43:23 57:15 58:2	463:25	dea's 433:20,22
critical 173:13,16	82:17 156:2	dated 49:1 182:18	434:2,8 435:2
177:22 202:19	351:25	270:1,22,24 281:1	dead 93:19 242:4
crystal 82:9	danielle 2:6 15:15	382:4 386:12	258:3 422:5
csb 215:7 258:10	dashboard 73:20	437:21	deal 187:5 206:8
cuff 413:10	76:3 163:7 169:4	dates 9:11 49:9	213:5 235:16
cumulative 236:15	359:3 440:4,6	136:25 266:10	445:3
currently 17:12	dashboards	dating 353:13	dealer 86:9,18
62:6 156:22	410:18	david 7:21 9:2	dealers 85:22
custody 6:14	data 52:14,23	118:3,11 265:13	179:23 263:3
cut 90:18 110:5,7	73:20 76:3 120:9	281:2,5	dealing 172:21
cutting 91:8	120:12 121:2,4,17	davis 133:20	236:8 402:19
cuyahoga 1:22	121:25 122:22	134:15,16 135:8	dealt 99:11 421:15
8:12 14:17 27:4	123:4,7,10 127:16	dawson 193:14	dear 460:10
66:11 264:12	127:18 129:23	day 2:13 15:19	death 21:2 35:13
270:12 458:4	130:1,10 133:4,12	45:14,21 52:18	161:12,12 193:21
cvs 416:12	133:17 134:5,8	82:23,23 100:3	235:3 251:11
	135:2,2 146:17,21	102:9,10 160:18	

[deaths - deposed]

Page 21

deaths 9:12 203:20 211:10 214:21 266:11 337:15,21 338:17 debacco 1:25 16:21 458:6 459:14 deborah 27:20 debris 249:15 decade 20:23 55:24 175:15 176:18 186:2 decades 56:7 77:22 154:1 193:2 194:12 445:16 448:10 deceased 337:25 decedent 336:25 december 23:16 32:21 62:9 182:18 270:23,24 367:23 435:14,21 436:7 437:4,18 438:2 440:10 448:17,22 450:9,24 453:20 deception 21:8 43:22 46:11 221:3 deceptions 57:14 156:1 deceptive 274:14 decided 363:24 decision 310:10 318:14 330:15 decisions 122:19 227:22 322:7 326:9 deck 199:1 372:14 372:24 declare 193:3 declared 446:16	decline 262:19 decrease 197:16 220:21 225:11,14 225:19 decreased 195:22 195:25 224:11 250:3 260:6 decreases 226:15 decreasing 69:8 69:18,19 225:15 454:17,22 dedicated 201:6 deed 461:14 462:20 deemed 460:19 deems 424:22 deep 79:25 287:4 deeper 166:6 186:12 deepest 20:5 deeply 109:22 114:2 175:16,17 176:19 defendant 171:23 273:6 289:9 defendant's 8:15 264:16 defendants 7:20 7:24 8:3,8,9 9:3 14:18 16:5,17 41:10,12 46:7 118:1,9 125:16 128:8,15 136:6,13 158:11 170:22 171:7 172:4,19 247:5 264:3,5 265:15 266:23 269:20,21 270:15 271:11 274:14 275:18,23 276:15 277:10 279:13	281:23 282:9 288:4 289:10 293:5,13 294:4 304:24 308:24 313:12 315:8 319:20 320:8 323:15 324:4,9 327:2 329:22 333:5,16,24 334:16,17,24 338:18 341:7 343:22 353:11 376:6 416:14,18 417:16,23 418:22 419:4,20 421:13 422:12 423:9 424:4 425:3,11 defense 44:23 87:11 187:14 277:21 279:6 281:17 286:20 322:3 328:19 408:13 defer 254:5,8 deferred 197:25 198:1 255:17 definitely 40:4 111:9 138:9 232:21 377:24 definition 38:1 108:20 definitively 77:7 284:11 delivery 457:9,11 demand 53:24 54:7 68:25 69:12 69:18 92:5 93:7 94:22,22 202:25 222:1 239:2 demarcation 45:5	democrat 20:9 democratic 354:15 democrats 174:5 dentist 112:23,24 113:2 dentists 112:15,20 184:10 department 24:19 44:18 63:22,24 86:7 103:18 146:19 149:13 150:5 163:1 165:3 165:16,21 169:5 172:2 187:20 204:17 205:7 207:10,11 215:3 217:9 218:2 227:20 230:1,4,25 231:1,7,14 244:24 245:3 256:22 439:11,13 460:22 department's 52:15 departments 150:6 244:1,12 438:12 dependence 321:10 dependency 130:23 284:22 303:5 316:7 328:8 dependent 196:17 258:24 depending 108:20 401:4 depends 144:17 158:19 244:11 252:8,17 depicting 383:10 deposed 17:2 76:19 183:1
---	---	---	---

[deposed - different]

Page 22

338:11 356:2 deposition 1:16 7:4 14:8,15 17:22 17:24,25 22:4,6,8 22:14,22 23:7 24:5 25:20 28:4,9 47:25 49:18,24 56:4 61:7 67:18 73:2 74:6 82:7 88:12 115:21 118:5,18 125:9 128:11,21 136:9 153:3 182:2 263:24 264:10,22 265:4,11,21 266:3 266:9 268:11 282:12 292:16 295:15 330:25 366:15 367:9 372:17 375:20 377:7 378:12 379:14 380:14 385:21 386:23 397:14 399:18 400:9 427:24 434:21 439:16 452:17 455:25 456:7,8 458:20 460:8,11 461:1,3 462:1,3 depositions 25:23 26:9 27:3 32:1,20 82:2 depressants 51:17 depth 151:10 186:24 300:11 deputy 213:16 derivative 37:12 37:13 77:17 derivatives 93:16	derived 162:3 describe 231:25 273:2 described 30:20 33:16 233:9 238:11 257:11 284:4 367:7 394:25 description 7:2 designate 267:24 designated 23:3 23:10,14 33:3,21 88:6 149:25 182:23 185:21 200:15 229:22 267:4 282:11 293:23 346:2,13 366:19 426:6 designations 267:7 designed 197:19 445:6 designee 285:22 297:17 298:13 318:17 350:4 397:24 desirable 251:18 desire 55:5 93:5,6 422:23 desk 203:13 desperate 54:10 54:12 177:16,20 407:4 despite 395:2 detail 300:18 detailed 119:20 detect 169:1,11 detecting 169:17 detective 24:19,21 59:2 63:12,13 113:23 120:21 140:7,9 149:5,6,8	151:17 152:15,18 152:19,21,23 154:8,18 163:23 163:25 165:12,14 165:22 166:1 167:14 169:19,21 204:10 349:20 356:3 453:25 454:11,23 detectives 46:5 149:5 158:22 161:9 168:8 199:6 203:9,11,18 221:24 232:17 434:12 454:4 determination 205:19 302:4,11 326:12 383:19 determine 132:14 301:17 309:19 317:12 321:14 331:25 337:5 363:19 determined 121:24 123:6 303:8 322:5 determines 227:13 determining 326:6 330:10 detera 171:25 172:7 deterrent 315:7 316:11 detox 227:17 develop 75:24 299:4 developed 333:4 334:14 development 250:10,11 251:14 251:21	devote 32:5 devoted 211:22 diabetes 198:18 201:7,8,18 202:11 202:15,17 222:18 diagnosed 283:17 284:19,21 287:17 289:14 327:16 328:5,7 332:22 diagnoses 286:5 diagnosis 184:24 293:14,15 317:5 317:13,24 318:21 319:3 328:2,13 331:17 die 195:24 452:3 died 89:13 232:11 242:19,24 322:1 335:8 337:6 difference 37:20 46:3 71:2 122:11 156:10 167:8 176:23 177:1 242:8 296:13 different 26:20 30:8 46:16 65:22 65:24 78:7,8,21,22 79:10 84:20,24 85:13,13 93:15,16 94:3 100:16 109:12,23 110:13 110:24 115:13,14 117:9 122:16 133:16 134:21 140:25 144:20 147:5 148:25 150:2 158:24 179:25,25 180:3 185:7,9,18,18 186:6,11 189:9,22 193:7 200:18
--	---	--	---

[different - distributors]

Page 23

207:7 208:10	directly 37:18	298:14,23	334:5,7,14,15
210:13,19 219:14	78:18 100:25	discussed 49:13,16	disorders 184:20
224:16 244:12	187:7 193:14	84:5 143:14	dispatched 209:2
261:4 262:25	239:1 241:16	188:10 199:8	234:11
271:14 279:16	391:14	281:13 284:19	dispensed 121:19
284:24 311:3	director 24:17,24	295:10 303:4	320:14,18,19
316:22 349:15	25:1 27:6,8,21,25	319:7 344:7	384:24
350:23 361:16	211:23 213:16	361:25 363:6	dispenses 41:13
379:3 392:4	224:6 259:13	367:13 372:5,9	dispensing 189:1
404:18 436:15	296:11 350:9	379:16 406:24	189:11
442:6 448:7	400:13 403:4	407:24 425:22	dispose 172:16,16
differentiate 300:7	406:25 407:7	450:8,13	disposed 103:14
difficult 140:14,17	410:23 452:21	discussing 368:19	disseminated
153:9 199:8	dis 100:11 320:13	discussion 35:15	382:11 444:10
205:21 207:15	disagree 70:22	75:2 76:20 90:10	distinction 38:10
208:14 252:14	71:5 236:14	94:6 222:7 224:5	286:11 360:24
253:11	298:10 383:14,22	269:4 313:15	361:1 441:3,3
dig 409:22	441:21 453:8	368:3,17,22	distinguish 286:10
dilaudid 39:17	disagreements	371:24 372:10	distracted 124:25
direct 166:10	453:6	382:1,14,17	distribute 41:2,7
172:24 218:4,5	disallow 251:3	447:13 451:23	41:15,18 180:9
227:8 230:6,7	disappear 248:20	454:13	distributed 51:21
231:12 237:18	249:2 261:3	discussions 149:4	179:15 350:21
242:8,8 272:24	disbursal 51:20	167:13 295:19	distributes 41:13
274:1 280:2	disc 449:17	310:13 372:3	distributing
282:24 287:5	disciplined 143:15	379:11 448:8	180:10 352:19
294:19 314:15,23	339:18,23 341:6	450:16,19	distribution 43:11
329:9 336:14	disclose 329:25	disease 77:15	69:1,13,19 92:7,20
339:7 357:2,8,9,14	330:4	211:9 214:20	189:1,11 416:3
387:1 402:6	discount 390:3,5	217:1,18 223:3	428:12,13 445:7
directed 37:4	discovery 8:16 9:4	228:18 231:16	454:21
267:23 362:18	111:6 124:6 131:7	404:6	distributor 7:19
451:10	131:15 132:2	disintegrate	7:23 8:2 99:24
directing 274:6	264:18 265:17	172:15	100:10,11 105:6
316:25 331:9	268:3 270:16	disk 125:8 237:6	118:1,9 128:8,15
335:1 379:20	276:1 330:15	disorder 283:17	136:6,13
direction 85:4	390:25 414:20	287:18 289:14	distributors 99:23
226:25 352:18	discretion 177:25	293:16 328:14,21	100:5,20,25 101:3
391:12	178:19 181:9	329:3 331:17	171:21 180:21
directives 294:21	discuss 71:10	332:1,12,22 333:3	384:23 395:1
305:18	149:14 153:2	333:4,16,23 334:3	450:3

[district - donna]

Page 24

district 1:1,2 14:21,22 174:25	203:11 214:5 250:10,12,13	157:5 162:5 179:22 180:14	284:7 290:17 294:10 296:16
dive 80:1 166:6 186:12 287:4	divulge 178:24	184:10 194:8	297:6 299:1 301:3
diver 150:1	doc 100:17 103:2 113:10,12 114:1	261:9 299:20	301:4 305:17
diversion 51:1,25 52:16,17 53:8	114:22	305:1,8 309:24	328:1 330:24
64:10 80:3 96:9	docs 111:9 114:18	310:3,9,13,18,18	332:7 400:4
96:12,13,20 97:7,8	124:9,21 361:7	312:10,24 339:18	436:10
97:12,13,16,22	doctor 37:5 79:18	340:24 341:9,12	dodson 27:21
101:10 103:19	79:20 80:2,5,13	342:23,25 343:6	doing 18:5 31:23
107:7,25 112:2,16	82:19 97:6,15,16	343:17,18 357:4	59:20 60:2 111:1
112:24 113:4	98:3,7,7,10,14,19	360:19 368:25	111:2,12 117:5
115:19 116:3,15	98:20,20,21 99:2	391:5,6,7,16	174:21 180:6,7
117:19 119:4	99:25 100:12,14	422:25	207:24 212:3,6,7
120:4,20 121:6	104:12,23 113:16	document 1:10 7:5	215:4 242:15
137:11,15 141:12	114:3,24,25,25	7:8 9:11,13,16	277:2 373:1 396:6
141:15 146:9,12	115:2 130:16	22:3 47:20,23	421:25 424:13
146:25 147:10,13	132:15 135:15	48:1,25 49:1,9,14	426:14
147:25 150:4	139:16 144:3	50:5 61:1,8 67:2	doj 210:7
156:11 162:24	172:23 180:4,23	88:9 117:23	dollar 192:16
169:1,12,18 170:3	180:24 260:15	119:11 128:5	206:4 216:6
170:16,19,23	296:9 334:21	129:16,16 136:3	226:11 229:19
179:10 181:10	369:4 391:13	266:10 269:15	dollars 88:5
189:2,11 201:14	393:12,23 423:6,6	270:9,21 282:6	139:18 173:18
220:22 221:19,24	doctor's 144:16	286:25 297:2,10	175:19 176:20
222:16 305:5	215:10	297:13,15,19,21	186:10,11 187:21
364:10 394:3,4,7	doctors 40:10,17	299:2 300:16	188:17 200:9,10
428:16 434:12	40:23 100:5,16,22	314:19 331:5	200:15 201:16,25
445:7	101:1 102:11	373:22 378:13	202:21,23 203:1
diversions 150:2	103:2,3,5,8 108:2	379:14,16 382:4	206:9 209:17,20
diverted 43:16	108:6,8 109:10,14	385:18,22 386:8	210:1 216:8,14
51:17 91:4,20	110:21 111:4	387:17 388:22	223:12,19 224:19
97:1 102:21	112:5,7,9 113:22	427:23 437:6,19	227:9 255:3
105:24 111:16	114:14 115:8,13	documentation	domestic 209:5
158:16,20 159:12	116:22 129:17,18	303:18	dominant 94:7
197:18,23 202:4	130:1,3 131:11	documents 24:12	dominated 362:4
202:11 208:17	132:1,8 133:6	25:2 28:11,16	donated 239:4,19
212:13 428:13,17	135:17,22 141:1	29:12,20 32:22	donna 24:25 26:2
division 1:3 14:23	143:2,6,15 144:25	43:24 46:12 48:9	26:16 29:25 30:3
52:16 65:9 170:1	145:4 150:14	118:17 128:20	73:18 75:2,12
	153:8,16 155:22	155:25 210:5	76:19 296:10
		268:24 269:13	356:5 404:16,16

[donna - earlier]

Page 25

407:8 donna's 75:19 door 32:6 103:17 doors 139:18 dos 98:13 dosage 98:13 dose 308:2,6 doses 36:24 283:18 287:18 288:7 289:15 307:10 330:6 dosing 285:4,24 289:23 290:1,7,11 294:15 307:15,19 311:22 312:11 313:18 321:3,4,4,5 323:8,8 double 60:23 270:3 275:6 348:1 378:6 doubles 148:19 doubt 56:9 69:23 284:12 doug 58:24 74:5 75:12,19 295:3 452:17 dozen 115:22 dr 26:3,3 58:24,24 74:5 82:1,2 109:2 109:2,3 133:20 134:15,16 135:8 137:20,25 138:8 143:23 144:1 145:3,10,18 146:1 146:4,6 163:5 164:1 208:11 245:19,19 295:3 295:11,19 296:5,8 337:2,4 356:7,10 356:11,17,21 361:24 377:7	381:22,25 386:23 411:22 440:7 452:17 453:11 draft 31:7 dramatic 57:10 354:17,20 dramatically 221:16 draw 360:24 361:2 441:2,3 drew 88:21 drinking 348:20 drive 3:10 5:6 17:10 394:14 driven 230:15 245:1 driver 374:22 393:21 drives 262:4 376:2 driving 113:23 155:16 196:23 413:8 drop 244:2,5,13 dropped 370:17 dropping 93:18 drove 422:25 443:7 drug 4:19 7:5,12 9:13 21:4,10 37:17 43:23,23 45:17 46:12 47:21 48:1,18,21 51:18 57:15 58:14 62:6 62:17 63:13 64:4 65:5 67:20 68:3,9 68:14,24 70:4 82:8 89:8 92:8,19 93:1 130:22 137:11,15 147:14 147:25 148:3,13 154:19,24,25	155:25 159:7 164:13 166:14,15 169:25 170:11 179:23 187:15 200:10,14,19 203:19 204:16 206:13,20 207:2 209:17 210:8,15 227:20 231:22 244:7 245:8,24 246:3,6,11,14,16 246:17,21 247:2 247:18 249:6,8 250:21 263:3 359:5 363:8 378:14,23 400:19 401:3,21,22 402:1 402:2 410:13,14 410:23 427:8 445:16,18,20 448:11,12 453:17 454:3 drugs 21:9,9,25 38:12 42:17,19 51:11,24 58:2 63:1,4 65:21 69:2 69:6,17 70:8,14 71:22 72:2 84:24 85:13,21,24 86:3 87:7 91:5 92:16 95:25 98:21 112:12 148:25 154:13 156:2 159:16 180:9 230:17 394:9 401:15 403:22 404:18,21 405:3 428:16 454:9,17 454:22 drugstores 53:9	dsalerno 2:11 dual 184:24 ducks 362:15 due 45:3 124:8 192:21 195:22 250:2,4 402:14 dull 141:24 duly 17:1 458:7,10 dump 103:16 172:13 175:18 243:24 244:3 245:7,23 452:7 dumped 241:11 duped 113:12 duration 330:5 duties 149:18 duty 416:22,23 dying 84:18 174:24,24 175:10 175:20,21,22,23 198:25 387:6 452:1 e e 2:5 7:11 23:18 38:1 67:14,19 68:1,7 145:9 267:9 398:25,25 earlier 21:12 85:20 102:14 156:17 157:16 259:1 263:1 273:16 307:3 321:14 361:9 363:4 367:16 373:4 374:15 377:20,21 378:4 379:1 380:17 397:23 414:15 427:7 430:22 435:18 436:6 452:15
---	--	--	---

[early - enrolled]

Page 26

early 44:15,19 56:1 58:23 60:9 60:22 137:18 141:21 153:10 181:13 198:11 221:7 351:12 361:25 398:15 435:22 440:11 445:24 448:17,23 450:9,19,24 451:2 451:14,22 453:20 earmarked 203:19 earn 207:23 easier 394:20 easily 44:9 193:4 east 240:16 eastern 1:3 14:22 eat 91:9 280:12 economic 250:11 251:13,20 393:21 economist 257:16 258:18 educate 58:13,15 59:4 211:19 310:18 402:24 educated 261:9 451:15 educating 59:18 education 58:22 59:13,20 60:11 100:2 107:18 245:20 447:3 educational 346:19 355:2 360:12,16 effect 140:24 292:6 354:23 355:14 effective 199:17 306:20 352:15 369:2 387:5	effectively 442:2 effects 353:20 361:7 efficacy 361:8 efficiency 195:22 250:3 efficient 92:21 effort 87:4 158:17 159:21 163:2 189:21 195:7 210:10 211:19 228:5 239:20 241:13 288:3 452:10 efforts 59:13 170:18 185:23 195:12 199:22 212:1 232:13 245:4 433:19 434:1,5 451:9 eight 20:5 24:7 223:18 224:15 422:1 eighth 188:3 either 26:10 37:19 98:11 119:13 148:5 152:1 172:20 208:12 226:24 243:6 244:14 248:11 251:2 260:20 290:24 299:17 312:2,2 336:24 340:24 344:14 364:16 405:25 426:16 459:2 elected 225:10 354:18 442:22 446:5 447:18 449:11	electronic 283:25 electronically 271:22 elements 384:16 eleven 344:23 eligibility 227:13 248:2 eligible 215:16 246:11 eliminating 198:8 eller 398:23 ellis 3:4 15:24,24 else's 248:12 email 460:17 emergency 32:7 59:3 159:14,15 193:3 214:7 231:20 232:6 235:23 446:17,18 emotionally 432:8 empathy 154:10 employ 164:18 employed 17:13 26:10,14 164:25 165:15 252:9 322:8 employees 26:17 27:3 137:21 139:12,19 210:10 253:20 employers 250:17 employment 196:4 196:5 252:2 emt 232:13 236:7 236:8 emts 235:9,15 236:16,18 enact 364:13 enclosed 460:11 encountered 45:18 104:16 111:21	116:16 endless 258:1 endo 4:11,12 16:17 enforcement 48:21 58:12 71:4 82:14,21,24 107:24 115:1,5 116:17 121:14 140:16 141:1,19 142:24 158:21 159:6,18 160:9,11 160:13 166:11 167:4 168:2 169:8 178:1,20 181:10 199:5 200:12 203:4 206:12,13 206:19,20 221:20 222:2 234:3,6 235:22 244:15 310:21 363:9 408:1 410:9 440:8 445:21 448:4,14 449:3,4 enforcing 209:3 engage 364:17 430:4 engaged 112:1 119:3 156:1 310:17 353:11 360:12 363:22 364:4 enhance 198:2 enhanced 140:22 212:4 enhancement 198:2 enormous 432:11 enrolled 228:6 229:2
---	---	---	---

[entailed - exerted]

Page 27

entailed 119:16	380:2,4,8 382:15	evansville 4:22	examiner's 26:5
entered 182:11	383:4,11,24 384:3	evening 32:13	45:3 164:19 176:1
462:9	384:13 385:3	398:8,9	176:5 194:24
entire 65:9 248:16	390:4,6,17 391:10	event 459:3	199:24,25 207:23
257:18 461:5	395:11 403:22,24	events 288:19	208:11 221:12
462:5	446:20	eventually 399:10	336:24
entities 26:21	epiphany 396:11	everybody 100:17	example 34:8
204:7,20 214:24	equipment 176:6	260:23 408:20,24	66:12 69:11 72:5
276:13,13 303:19	equivalency 30:11	409:1	219:15 320:19
365:2 386:20	equivalent 130:20	everybody's 412:2	321:13 408:23
418:21 419:3,19	332:23 338:6	evidence 232:18	examples 387:18
421:12 422:11	er 95:11 315:5,5	235:1 242:9	387:25
424:3 425:2	era 221:21	390:12,14,14,18	exceeds 229:8
entitled 22:3 47:21	errata 460:13,18	390:21 408:16,20	excellent 270:8
61:2 128:6 136:3	462:7,10,18 463:1	evolution 167:15	271:5
298:14 422:10	especially 114:1	evolve 93:3 140:20	exception 182:23
entity 214:22	esq 2:4,5,5,6,14,19	evolved 232:25	exceptions 33:23
217:12 249:21	3:4,9,16 4:4,7,14	exacerbate 45:9	exchange 23:18
310:15 385:11	4:14,21 5:6	384:7	202:22,24 230:12
422:17 424:9	essential 174:6	exacerbated 45:9	230:16
425:10	essentially 37:17	383:15 393:3	excluding 168:14
entrance 259:10	139:14 172:8,15	423:5	257:10
entry 388:4	180:19 220:7	exacerbating	excuse 36:17
environment 78:8	239:22 250:14	390:6 419:12	111:8 210:6
216:11	establish 409:4	exact 80:21 115:20	338:22 415:17
epidemic 41:22	established 279:10	137:19,19 148:2	427:9 429:10
42:10,16,18 43:1,3	370:9	exactly 65:16	432:19 434:25
43:8,13 45:6,7	estimate 28:13	66:23 104:24	executed 462:10
87:10,17 154:3	80:25 160:24	105:3,7 243:3	execution 461:14
174:18 175:17	161:4 399:25	246:9 267:18	462:19
192:22 196:2,11	400:5 412:15	313:21 327:15	executive 19:24
196:24 197:20	estimated 401:19	447:15	26:24 27:15,23
198:4 211:15	estimates 51:16	exalgo 315:5	186:7 187:7
212:7 224:9	et 1:11,11 449:3	exam 20:18	211:23 213:10
232:25 238:4	evaluate 115:2	examination 6:7	350:7 364:23
241:4 243:18	250:8 320:12	16:25 17:4 266:17	446:9,13,16
248:5 249:9 251:3	364:3	266:25 398:6	executive's 17:14
256:2 257:9	evaluated 232:20	examiner 161:13	73:10 187:16
258:15 261:3	evaluating 321:3	164:16 187:13	193:10 250:12
305:24 350:16	388:19	221:17 337:18	exerted 434:17
365:15 377:16			435:8

exhibit 6:14 7:3,5 7:8,11,14,18,22 8:1,4,6,11,18,21 9:1,6,9,11,13,16 22:3,6 33:2 47:20 47:25 61:1,4,5,7 62:13 64:11 67:14 67:18 88:9,12 117:23 118:5 123:17,18 125:22 128:5,11 136:3,9 182:2,17 188:22 190:20,20,21 194:17 220:19 237:10 263:24 264:10,22 265:4 265:11,21 266:3,9 269:8,16,17,24 270:10,19 271:7,9 272:22,25 273:10 273:11,15,23 274:3,13,25 278:24 279:6,13 279:16 280:4,5,17 282:25 283:10,13 284:5,14 285:2 287:15 288:2 289:8 291:5,23 292:22,24 293:12 294:14 299:17 300:3,3,3,8,13,21 305:13 308:14,23 308:24 314:16,17 314:24 315:20 316:4 317:1,4 318:7 325:13 326:13 329:8 330:23,23 335:2,6 335:13,22 336:15 336:17,18,18,22 337:5,19 338:13	338:14,15 339:6 344:22,22 347:10 347:20,23 349:1 366:14,22 372:16 378:12,20,21 379:6,21,23 382:22 385:21 386:6 387:2 389:23 397:16 415:8,9 427:5,9,15 427:19 428:2 433:11,13 437:7,9 442:20 exhibits 6:5,15 7:1 190:11 274:18 275:4 278:20,21 283:23 284:2,10 290:19,24 292:14 292:16 327:9 340:8 342:20 345:11,11,24 427:18 exist 65:25 213:13 294:12 307:12 existed 77:20,22 152:12 153:5 213:17 442:4 444:17 exists 83:4 expand 210:15 248:1 250:23 expanded 246:19 247:1 expansion 200:9 209:18 246:22 365:11 expect 262:18 expectation 165:9 177:10,11 expended 215:1	expensive 74:12 262:5 experience 25:6 28:7 260:18 412:15 413:16 414:8 415:4 experienced 68:24 413:12 experiences 34:1,2 411:18 expert 130:11 397:18,25 398:2 402:22 403:3 415:15,22 418:23 419:24 421:14 422:13 424:5 425:18 expertise 208:14 402:19 407:15 453:2 experts 75:13 121:24 123:10 292:9 318:15 322:8 326:11 330:17 446:24 expiration 461:19 462:25 463:25 expires 459:17 explain 197:4 417:4 431:24 explained 30:3 395:21 explanations 300:12 explicit 300:18 explicitly 259:5 explode 77:23 exploded 192:23 221:9 explosion 222:1	exposure 233:3 extensively 24:23 extent 182:25 226:4 234:1 247:20 259:2,4 extra 61:17 extrapolate 55:11 extrapolated 310:6 312:22 extremely 34:12 50:17 eye 436:18 eyes 8:20,23 9:8 265:1,8,25
f			
f 2:19 3:14 4:7 5:3 face 7:15 49:1 54:22 88:14 faced 221:10 225:18 facilities 218:12 229:8 249:14 365:9 389:19 facility 216:5 217:5 229:11 239:14 320:20 451:17 facing 42:16 362:13 396:25 fact 40:14,16,22 56:14 58:2,3 72:14 74:23 85:3 110:25 123:24 127:1 152:6 164:11 173:12 309:20 321:20 353:24 381:10 395:2 399:8 425:1 factor 196:23 320:15 355:22 362:16 377:15			

[factor - fentanyl]

Page 29

383:3,24 384:1,11 384:15 385:6 393:11 413:9 factors 45:9 71:8 275:13 320:4 374:7 382:18,20 382:23,24 383:10 383:19 384:12 385:3,4 389:22 390:4 392:24 393:1,4,8 395:10 418:16 419:13 420:21 424:17 425:17,21 factual 418:11 fail 18:14 122:1 failed 211:5 329:24 330:4 fair 21:10 80:25 85:7 86:14 87:2,3 89:6,17 90:19 108:10 110:20 178:9 215:11 256:10 262:24 304:21 355:5 364:1 444:3 fairly 127:17 faith 114:22 fall 106:9 223:20 falling 196:5 falls 1:22 14:17 66:11 257:12 false 46:15 329:25 333:9 391:18 familial 259:22 260:2,12,23 familiar 30:9 41:25 48:12,21 67:1 96:8 113:1 116:25 119:9,12 129:13 150:23	191:15 267:11 278:11 286:7,25 300:9,18 355:25 356:2,4,5 385:14 388:14 389:15 familiarize 282:6 families 224:8 238:4 241:3 258:19 411:23 family 42:7 80:25 101:23 179:16 194:2 241:16 242:3 259:24 260:5,7,9,16 352:20 411:21 435:16 436:21 449:10 fancy 385:8 far 52:1,21 66:10 70:19 80:1 81:1 91:10 99:15,15 144:17 187:16 234:9 245:21 246:8 263:5 333:25 334:1 364:10 403:5 435:9 444:15 447:1 farther 261:8 fashion 42:14 45:20 103:7 163:18 262:17 fashioned 210:9 fatal 7:15 88:14 203:12 fatigue 195:4 236:21 fault 104:11 105:24 106:3,6 176:12	fbi 169:23 170:1 fda 39:25 40:2,5,6 359:10,24 360:5,7 362:20 363:13 364:8 365:17,20 365:24 369:21 370:10 395:25 450:2 fda's 359:15 federal 16:25 209:22,23 210:21 364:3,6 365:8 federally 364:20 feed 370:17 378:5 403:8 feel 18:10 25:5 26:7 28:8 30:21 33:18 34:14 102:18 109:11 116:24 162:7 167:10 177:12 181:6 189:15 192:9 197:1 206:23,24 216:15 220:9 253:16 286:24 291:20 299:12 300:6 302:15 331:2 336:5 346:10 347:7,22 355:14 367:5 368:12 376:12 393:19 404:7 412:7 432:24 435:24 feet 73:21 175:11 176:20 feinstein 3:16 6:9 16:3,4 266:18,21 267:18 274:23 275:3 280:10,13 298:6,9,22,25	311:13 312:25 313:8 322:23 323:24 324:16 339:3 345:14,19 347:6,11,15,19,21 348:7 365:25 366:7 370:18,25 371:4,8,14,17,20 388:25 389:2,6 397:1,9 398:3 415:13 418:14 420:24 430:21 437:12 445:2 feinstein's 431:7 449:20 felon 117:10 felonies 438:16 felonization 196:11 felons 153:20 196:3 251:3 felony 44:23 66:14 160:16 204:11 251:7 252:22 felt 75:4 84:23 174:17,18 175:9 216:16 240:10 402:13 fend 216:11 fentanyl 30:2 38:19 42:23 57:11 72:7,15,20 74:13 81:6,12,15,20 82:9 84:18 85:2,23 86:6,11,19 89:1,13 89:22,23 90:2,11 90:14,18,20,22,24 91:4 94:14,21 95:19,23 161:7 202:16,20 222:20 230:13 233:3
--	--	--	---

245:14 261:2,16 262:13,21 263:6 263:11 394:10 395:4 fentora 317:3,19 field 241:11 252:23 369:16,16 376:10 fields 196:10 251:6 398:2 452:8 fifth 4:22 45:10,11 64:12 306:17 374:16,21 375:5 375:12,15 376:23 388:6 389:9 430:24 431:2 fight 393:17 figure 117:11 186:16 188:6,19 192:16 figures 63:3,8 64:19 206:4 file 449:22 filed 31:7,8,9 49:12 353:5 365:13 files 319:2 329:1 filing 171:13 fill 69:7 71:17 85:1 100:19 126:6,24 134:18,21 224:23 255:19 filled 132:23 139:22,23 278:8 341:19 416:21,23 filling 105:3 139:14 140:1 252:14 416:4 final 9:14 378:15 finally 451:25	finance 24:17 27:6 27:8 financial 227:23 253:17,24 financially 186:13 432:8 find 85:14 94:21 134:24 156:23 159:22 160:1,25 161:7 162:11 188:17 239:17 254:23 262:4 362:12 387:20 407:5 437:19 451:11 460:11 finding 149:16 407:4 findings 377:25 fine 288:22 298:8 finish 25:9 134:12 finished 455:4 fire 384:17 385:10 393:3 420:22 fireball 403:24 fires 421:2 first 7:23 8:1,3,8,9 8:15 17:1 31:5,6 45:24 46:2 48:25 50:8,25 52:16 58:21 62:8 67:15 68:22 74:22 97:8 100:6 116:16 119:15 128:7,13 136:5,6,11,13 141:11 143:6,8 152:24 159:5 160:10,10,22 167:24 174:9 187:9,10 189:7 195:5,14 197:15 211:1,1,5,12	220:17,17 222:21 223:6 231:21 232:1,2,6 236:23 237:25 259:1 262:8 264:3,5,16 269:15,20,21 270:15 272:25 275:21 285:18 287:9 295:25 310:20 315:1 335:25 350:11,15 351:1,9 360:11 361:10,19 367:22 368:17 372:13 384:20 388:4 398:14 401:12 403:17,19 435:23 435:25 445:10,22 448:23 450:12 458:10 firsthand 352:13 409:8 fiscal 256:24 fit 239:18 245:11 420:2 fits 238:10 245:8 five 80:17 102:9 103:1 129:10 131:10 132:1 145:22 176:3 186:9 236:19 436:2 452:1,2 455:3 fix 370:19 flag 328:23 358:4 flags 396:19 flat 108:1 223:16 223:21 225:17 fleets 256:3,17 flip 270:1 397:2	flippant 413:11 flipped 299:18 368:4 floating 87:25 flood 45:12,19 52:11 60:8 flooded 154:22 452:3 floor 3:16 188:3 florida 2:15 flowchart 132:20 flowers 2:5 15:8,9 61:17,21 133:8 205:1 267:15 271:12 274:19 275:2 276:24 279:19,24 281:18 281:25 282:23 296:6 299:7 300:4 300:15 301:20 302:7 303:1 304:5 304:13,25 305:16 306:6 307:25 309:1 312:18 318:2,22 320:9 321:6,18 332:15 340:21 388:23 389:5 421:20 422:20 425:5 426:2,13,18,21 fluently 338:12 focus 32:7 93:23 94:3 201:5 247:7 259:16 365:12 418:24 451:6,7,19 focused 93:22 198:4 200:18 201:21 203:15 207:13 220:8 286:16 376:13 378:1 447:20
---	---	---	--

[focusing - forming]

Page 31

focusing 116:20 141:7 160:22 183:10 216:19 244:20	following 64:19 110:21 120:13 129:5	forged 121:11 forgery 107:8 248:9	279:18,19 282:23 285:25 299:7 300:4 303:1 304:5 304:13,25 305:16 306:6 309:1 318:2 318:22 320:9 321:18 327:22 328:16 332:15 337:22 340:21 357:22 358:6 362:9 363:20 364:7 365:23 367:20 368:7 374:10 376:18 382:7 390:19 392:16 395:18,24 396:16 400:20,24 401:9 402:6,21 405:12 406:8 408:18 411:9,15 412:19,25 418:4 419:6 429:1,6 430:18 432:22 435:19 439:23 440:20 441:20 443:24 444:19 449:23 450:5 451:3 453:5
foil 172:9	follows 17:3 382:22	forging 43:23 46:12 155:25	formal 172:4
folks 26:25 43:20 43:22 44:5,17 46:13 53:22 54:9 58:18 60:4 73:18 73:21 76:14 78:4 83:7 84:16 99:20 102:17 114:16 117:6 137:23 142:15 147:4 151:21 153:21 157:6 159:3,14,22 160:14 166:7 195:8 199:11 215:13 216:9 227:19 228:6 229:5 232:3 233:12 234:15 239:9 240:7 244:8 250:20 252:19 284:19,20,21 286:4 303:4,5 308:10 321:10 328:4 334:10 341:12 380:18,22 394:16 399:11 401:14 405:21 406:5 408:3 409:25 410:10,25 411:12,20 412:14 412:17,24 413:2,4 413:13 415:4 422:25 443:6 451:16	food 117:15 359:5 393:18 foot 440:24 force 9:14,14 59:22 65:6 73:19 89:9 149:12,17,25 166:15 169:20,21 169:22,23 170:7 170:15 222:9,13 245:2 350:18 351:8 352:11 354:8 355:8,18 356:13,24 362:1 362:23 363:1,8 367:22 368:4,19 371:23 372:1 377:14 378:14,15 378:23 379:18 390:1 395:8 396:11 405:17 410:6,7 434:13 435:13 436:8,13 445:4,11,16,20,23 446:10,15 447:17 448:6,9,11,18,20 448:24 453:19	forgot 220:16 263:1 forgotten 171:15 form 40:15 41:3 49:21 56:16 59:15 71:24 72:17 77:13 77:22 78:24 79:12 80:7,14,23 81:13 81:23 84:9 87:1 92:3,10,23 94:16 95:6 97:5 98:4 104:14 105:18 106:1,7 107:3 108:4 109:9,18 110:18 111:13 112:4,17 114:13 116:23 121:7,21 122:14 123:13 124:3 127:11 128:22 138:6 139:2 141:13 143:24 145:16 157:17 158:13 160:3 171:9,20 173:14 174:12 175:14 176:15 178:7 180:17 183:18 184:22 189:12 206:22 208:7 210:20 224:4 225:13 235:19 236:13 242:13 249:18 252:7 254:10 256:5,13 261:5,20 271:12,22 276:24	formation 356:23 formed 73:6 222:11 355:8 363:4 375:19 former 19:15 122:10 216:2 242:7 390:10 forming 102:23 222:9 343:3 391:19 392:6
follow 29:8,10,16 311:9 343:25 360:15	forced 130:17 403:5 forces 211:17 222:11 363:4 forefront 367:25 foregoing 326:18 458:16,21 461:13 462:18 foremost 232:6		

[forms - give]

Page 32

forms 146:13 174:14 239:3 259:20 276:8 formulate 446:19 formulations 315:8 forth 267:22 forward 182:15 413:24 432:3 446:22 460:15 foster 196:17,18 258:23,24 259:3 259:18 found 53:19 89:13 foundation 133:9 274:24 299:8 300:5 founded 241:5 fount 255:21 four 19:21 51:23 137:9 186:9 267:7 374:20 428:19 fourth 331:10 frame 119:5 120:15 246:9 372:1 373:7 436:2 francisco 4:5 frankly 25:3 32:9 49:23 57:25 75:3 76:16 91:16 99:20 113:25 116:14 188:16 232:24 286:19 295:6 328:6 349:15 351:13 352:11 363:21 free 18:10 36:9 291:20 318:20 331:2 336:5 346:10 347:7,22 401:10 402:7	461:14 462:20 frequently 199:7 201:24 436:13 454:5 fresh 20:18 friday 279:15,23 291:4 friend 34:10,17,18 398:18 friends 35:14,21 84:18 101:23 103:20 front 1:22 4:4 14:16 54:19 82:25 148:12 200:7 226:12 237:11 260:24 269:16,23 269:25 270:18 271:2 273:11 278:21 280:5,15 284:9 290:17 299:15,16 305:6 334:22 340:7 342:20 344:20 350:19 373:3 379:4 408:8 410:21 414:2 427:5,6 433:11,12 full 9:4 17:9 19:20 31:11 104:8 252:2 258:20 260:19 265:16 287:9 315:1 326:16 335:25 fully 115:1 fun 256:16 268:14 function 169:3 functioning 261:25 fund 200:3 216:8 216:13,14 223:13	227:5,5,6 247:15 254:7 255:8 fundamental 197:1 funded 171:18 223:12 249:22 funder 227:4 funding 44:22 197:16,17,22 202:4,8 220:22,22 223:9,17 224:10 224:18,18,22 225:11 228:4 funds 200:6 210:19 212:1 215:2 229:15,19 247:16,23 257:3 451:12 funneled 369:3,6 further 250:20 282:8 355:16 398:4 455:15 458:19 459:1 future 181:2 258:6	general 101:19 203:11 216:8,13 247:15 255:8 322:6 408:2 449:1 generally 47:3 153:18 160:21,24 252:1 408:14 generate 319:12 319:22 324:2 340:14 342:20 generational 258:14 generators 250:6 251:14 generic 55:15 gentlemen 405:1 409:16 geographic 129:7 346:21 geographical 119:1 130:4,8 geography 90:8 george 26:3 gertrude 26:5 381:18 gessner 26:6 356:1 381:19 443:4 gessner's 115:21 getting 55:1 84:21 286:22 311:12 333:25 345:12 393:22 450:7 451:6 452:14 give 17:8 27:18 34:11 103:21 164:9 180:25 181:16 233:24 234:7 380:19,22 408:23 419:7 455:21 457:1,10
		g	
		game 93:2 gap 224:23 garner 26:11 gary 26:4 gas 157:23 gasoline 393:2 420:22 421:2 gate 394:12 403:10 404:4,23 407:2 gathered 133:24 gathering 24:14 gear 214:6 gears 333:20 gee 168:16	

[given - groggy]

Page 33

given 105:13 114:15 161:20 234:23 293:20 322:15 323:4 340:17 401:4,20 423:7 458:13,18 giving 33:7 78:21 79:10 103:20 104:12,24 105:15 140:25 186:4 425:8 glad 345:14 402:17 gleaned 325:17 global 447:5 glove 169:6 go 14:10 18:7 30:16 40:3 53:2 74:15,15 77:18 84:22 97:15 102:13 117:8,9 119:6 123:16 125:2,19 134:17 151:20 168:18 175:2 177:8 179:19 180:23 182:15 184:25 189:6 191:7 192:3 192:12 193:22 197:5,12 199:4 200:6,21 206:3 211:11 215:11 218:1 227:17 229:23 230:21 231:19 233:21 241:14 255:24 257:6 261:8,23 262:21 263:17 269:14 275:11 295:7 370:19 393:12,14,20	410:13 422:6 426:20,23 440:12 442:5 goal 171:1 goes 51:10,15 52:13 132:24 159:7 204:12,14 204:15,21 274:20 322:22 428:18 449:17 going 18:7,9,13,19 23:8 29:9 36:8 38:8 76:18 87:22 87:24 95:13 99:24 106:9 114:17 124:2,20 131:2 155:10 159:19 160:16,17,17 167:1,20 177:8 178:14 180:25 181:1 186:18,20 186:20,21,23 189:5,6,18 197:4 201:7,25 206:3 220:15 222:23 225:20 226:3 237:16 250:19 257:23 258:9 261:12 262:1,15 262:16 263:15 266:24 281:6 286:1 304:6 310:2 313:10 318:3 322:19 323:19 324:21 334:19 342:25 343:12 345:18 351:4,5 352:2 361:6 366:18 370:15 378:19 391:18,19 392:25 393:17	394:17 397:12 401:3,8,8 402:5 413:24,25 414:13 419:7,9,23 421:18 422:8 423:3,4,10 424:11 429:14,16 442:15 453:23 good 15:8 16:12 16:15 17:6,7 19:25 20:8 67:5 80:5 92:25 114:22 114:24,25 137:6 154:11 163:3 167:25 180:24 181:14,17,20 254:25 255:1 262:2 266:19,20 269:11 398:8,9 407:10 452:5 google 29:18 30:14 googled 74:24 googling 29:21 gosh 28:18 134:7 233:17 339:2 439:17 gotten 92:21 138:25 210:24 257:20 government 169:3 169:15 194:4 209:22,23 210:22 444:18 governor 175:18 225:6 354:14,18 444:13,13 governor's 354:8 355:18 363:7 377:19 395:7,8 grabbed 53:1 grams 130:20	grand 19:11 21:13 46:23 141:17 grandma 260:13 grandparent 260:4 grant 49:3 170:25 172:5 200:8,15 209:17,20,20 210:4,7,11,18 224:22,23 247:16 247:23 446:22,23 granted 152:5 170:25 grants 49:11 171:18 224:20 graph 207:15 417:9 graphic 379:25 380:2 382:21 383:9 389:24,25 graphs 148:24 373:19 grateful 175:5 grave 83:4 great 203:1 313:14 greater 47:12 66:16 124:8 290:9 greatest 82:8 gregory's 239:12 240:24 greta 1:17 6:7 14:24 15:7,17 16:24 17:4,10 125:9 183:7,16 266:17 398:6 458:9 460:8 461:4 461:9 462:4,13 463:20 grievances 432:3 groggy 36:25
---	--	--	--

ground 18:3 422:4 group 35:13 231:12 239:12 240:24 416:13 445:5,12 448:13 448:16 grouped 299:25 groups 239:5 244:15,17 447:11 448:1,7 grow 45:23 growing 45:22,22 46:22 222:19 350:16 grown 259:19 grownups 193:8 gs 272:12 guard 381:8 guardrails 99:19 124:4 guenther's 26:4 guess 57:7,13 59:17 101:5,7 113:8 119:18 124:16,18 156:19 157:10 162:14,18 179:1 181:15 209:15 212:9 235:4 246:8,13 256:12 259:1 272:10 304:16 380:1 390:20 400:6 402:11 guessing 28:25 324:23 guidelines 295:23 307:4,8,9 377:8,15 386:24 389:18 gunpoint 53:22 guns 54:22	guy 165:19 guys 280:13 gynecologist 145:13 h h 170:10 habit 80:7 102:23 343:3 391:19 392:6 half 20:19,21 52:18 66:2 81:22 83:19 115:22 204:20 halfway 283:3,8 hand 124:8 169:5 184:25,25 378:19 386:4 454:15 459:6 handed 269:13 270:9 handful 90:3 145:5 handled 102:9 438:16,18 handling 221:4 236:10 438:15 hands 97:1,3 199:1 380:20 happen 53:16 58:19,20 86:13 322:2 358:14 436:16 happened 85:17 86:3,14 103:12 143:21 147:6,21 173:24 242:5 296:23 417:12 443:2 happening 59:5 99:5 101:17 102:3 103:24 163:16	200:7 253:10 374:5 happens 40:22,23 85:3 204:8,20 205:21,22 hard 45:14 190:17 207:12 208:24 209:10,14 251:12 253:24 257:13 258:17 311:9 375:25 harder 262:5 harm 43:10 181:2 189:14 190:3 192:21,25 193:1 194:11 202:1,1,1 202:18,25 205:16 229:17 257:21 305:22 331:19 352:3 390:22 391:3 431:23 432:6,11,18,20 433:2,4,7 451:25 452:8 harmful 304:4,11 305:15 353:20,25 391:20 harms 185:22 188:24 189:8 272:9 harper 109:3 137:20,25 310:19 harper's 138:8 143:23 144:1 146:1 hats 257:15 havoc 207:14 hawkins 2:19 15:20,20 head 59:25 175:15 176:18 450:24	451:7 headline 109:4 251:11 headquarters 251:20 health 2:18 4:11 8:19,22 9:7,10 15:22 25:1 26:19 44:18 47:10 58:11 59:21 60:4,11 73:9 74:2 76:4 83:3 86:7 142:24 146:18 162:25 163:9 169:5 172:1 172:5 184:20,25 187:20 198:5,17 198:19,20,21 201:24 204:17 211:7 212:12 214:18 215:3,9 216:23 217:2,9,14 217:19,22 218:10 218:14 223:1 226:20 227:7 228:16,20 229:1 229:25 230:4,4,24 231:1,3,7,14,14 238:1 243:17 244:24 245:3 257:24 264:24 265:6,23 266:5 296:12 320:3 322:6 326:10 359:2 377:2 385:15 386:13,20 388:18 389:14,19 406:25 407:7,25 410:19,24 439:11 439:12,19 448:5 449:5,7,11
--	---	---	---

healthcare 9:17 385:23 healthy 60:17 250:24 278:9 hear 377:5 heard 74:22 85:11 91:17 98:5 108:14 230:19 281:10 377:1 387:11,14 389:8,12 399:11 409:25 410:13,20 411:5,5,13,17 413:11 hearing 19:13 21:18 89:23 174:9 177:13 182:14 372:12 418:17 455:18 hearsay 242:8 heavily 140:15 heightened 395:4 heim 109:2 144:4 146:4 held 14:15,21 214:4 321:15 340:25 help 36:21 159:19 160:19 162:24 173:5 181:1 194:5 200:3,9 254:23 288:14 374:4 452:13 helped 141:25 175:13 176:14,25 247:17 helpful 208:14 helps 287:7 hereinafter 17:2 hereunto 459:5 heroin 7:15 34:23 34:25 37:14 38:2	38:16 41:1,6,13,18 42:22 44:10,12 57:10,16 63:5 69:11 72:5 73:13 74:13 76:25 77:18 77:20,21 78:1,5,10 78:14 81:6,11,20 82:9 83:15 84:3 85:2,6,10 86:9,10 88:13,25 90:23 91:5 92:1,13 93:16 94:15 95:19 95:23 147:18 157:22 161:6 241:10,18 242:18 261:2,13,15 262:4 262:8,13 394:9,12 394:14,21 399:10 401:6 403:10,17 403:22 404:4,23 405:4 406:6,6,16 406:19 407:2,5 410:4,15 412:17 414:10 429:10 heroin's 262:7 hesitate 282:15 293:17 hey 436:25 hidta 170:6,10 hierarchy 92:12 high 37:19 50:9,17 50:17,22 84:21 93:6 170:10 202:25 244:17 295:5 395:6 428:9 higham 27:20 higher 258:11 260:8 283:19 287:19 288:8 289:16 307:12 308:3,6,16 328:10	330:6 373:23 411:6 417:3,5 highest 48:17 highlighted 29:13 highly 107:21 173:12 208:9 hill 157:1 hipaa 178:23 181:11 hired 213:2,4,10 213:13,13,15,16 history 34:12 35:3 95:1 178:25 337:10 338:9 hit 253:24 hmm 167:25 hold 370:14 393:6 holistically 82:15 home 53:20 172:10,17 199:12 216:3 217:22 227:6 228:25 252:24 260:19,22 homes 216:3 232:4 homicide 203:14 honest 352:1 389:12 435:21 honestly 441:11 hooked 157:22 hope 103:10 239:7 240:23 241:5,13 246:12 249:12 257:1 403:9 hopefully 154:3 349:7 371:2 hopelessness 193:18 195:9 hopping 98:6,8,21 horse 258:3 422:5 hospice 124:24	hospital 95:10 101:14 308:10 449:9 hospital's 388:6 hospitals 47:13 51:22 232:4 hostetler 4:13 16:16 hostile 174:11 hostility 174:13 175:4 hosts 222:15 445:24 hour 32:10 234:5 322:20 392:6 hours 32:5,12 211:21,24 212:3,5 212:16,24 233:23 399:23 400:3 422:1 house 19:14 27:17 28:8 174:6 177:13 187:12,16,18 217:21 218:4 219:2 227:3,5 236:19 250:14 354:15 409:15 housing 215:13,16 215:19,20 216:10 217:5 hudson 63:23 huge 81:15 198:18 200:19 215:1 262:14 huh 25:17 26:22 41:24 50:4 51:4 60:15 62:14 64:21 97:24 100:18 118:23 120:17 123:19,23 134:9 160:23 163:24
--	---	---	---

[huh - inappropriate]

Page 36

165:23 171:19 172:12 191:5 209:19 211:16 215:25 218:6 220:20 223:4 231:23 243:15 244:21 294:1 309:10 314:18 319:23 342:4 351:21 360:21 372:7 373:6,8 374:17 382:16 421:5 436:20 445:9 human 192:15 194:7 376:3 432:10 hundred 275:7 405:24 hundreds 66:6 81:16 100:23 139:8,9 212:24 hurdles 181:6,9 hurt 82:20 hybrid 26:18 hylton 26:1,13 hysingla 315:5	422:11 424:3 identified 59:25 120:12 125:23 126:7,11,17 129:11,24 130:1,3 130:22 132:2,11 144:3 278:22 279:5 284:3 285:3 289:11,20 292:13 293:11 294:3,8 295:24 301:2 302:5,12 303:10 305:13 307:3 308:14,23 309:16 310:8,25 315:17 317:20 321:23 323:9,17 325:4,13 328:18 330:3 333:2 339:12,17 340:4 344:5,13 354:4 355:18 377:14 389:23 395:8,9,12,22 396:23 417:3 430:24 431:2 identifies 133:25 283:14 335:6,22 366:15 identify 15:3 60:6 118:25 132:4 155:22 254:2 268:1 272:4 273:2 273:8 279:4 284:16 297:8 299:5 301:9 307:16 308:22 311:6 312:14 313:11 316:2 320:1 323:20 336:21 337:19 419:2,19 422:18	identifying 100:21 150:7 259:13 274:24 275:13 276:12 285:9 288:6 296:17 306:1,22 322:12 327:1 343:6 394:16 446:25 ideology 248:16 354:21 ilene 27:22 illegal 41:1,6 44:12 111:12 180:7,10 248:24 429:9 illegally 57:2 111:25 illicit 91:14 394:1 394:3,4,5,8 illinois 3:10 5:7 illness 42:12 154:6 154:7 155:4 404:14 407:1 imagine 52:24 251:17 277:17 328:3 imat 446:21 447:7 immediate 9:4 233:13 265:16 immediately 93:19 198:25 387:4 impact 141:12,15 141:18,19 142:13 147:2 236:20 254:4,19 256:2 261:17 333:8 338:2 389:19 433:8 434:15 impacted 73:11 221:13 241:16 256:25 333:13	432:7 impactful 30:15 impacts 196:2 204:21 250:5 imperative 240:11 259:15 implementation 388:1 implemented 441:22 implementing 447:8 important 54:23 154:19 198:11,23 216:17 296:14 390:11 393:9 imported 90:15,24 91:2,15 429:9 impossible 114:5 impression 443:1 improper 108:1 110:17,19 113:17 114:21 135:9,10 135:18 304:20 310:1 313:18 314:9 320:5 328:15 332:14 340:25 341:10 353:1 376:5 improperly 108:6 108:9 114:12 121:20 improved 92:19 improvements 197:25 inaccurate 312:9 333:13 391:2,13 inadvertently 25:13 inappropriate 308:3,7
i			
ibh 227:5 229:8,10 idea 30:5 174:11 369:13 452:7 identification 22:10 47:18 48:5 61:13 67:23 88:17 118:13 128:17 136:15 182:6 264:8,20 265:2,9 265:19 266:1,7,13 291:25 294:14 378:17,20 386:2,6 418:21 421:12			

incarcerate 154:15	income 207:24 252:24 254:17,19	incurring 195:6 224:8	individuals 53:18 101:23 110:23
incarcerating 155:6	254:20 255:6	incurs 217:13 230:1	129:5 147:16
inches 172:9,9	incorporated 462:12	ind 374:12	155:25 178:2,21
incident 89:15 102:8 161:6 446:18	incorrectly 281:7	independent 227:1 243:1 276:19	184:19 185:2
incidents 57:21 431:22	increase 44:15,20 44:23 46:11 51:3 54:5 57:10 92:1,4 92:5,6 126:8,11 154:23 196:21,23 202:21 218:24 223:24,25 224:3 246:7,10 259:15 330:5 402:14 451:10,15	independently 205:3	226:24 272:4 277:14 310:5 315:3 317:5 332:11 333:2 335:7 336:21 337:6 339:12,16 339:22 341:21 349:14 369:10 404:1 410:12,15 418:22 419:3,19 421:12 422:11 424:3 425:2 428:15,24 432:7 432:15 449:15
include 53:8 62:22 63:18 65:12 112:2 133:12 219:8 242:25 300:22 311:1 317:21 318:9 319:25 343:7 384:22 417:16	increased 42:14 44:22 51:22 72:10 194:23 200:13 223:10,18 233:1 238:15 239:2 243:25 246:3 396:21 416:20 419:14	index 6:1,5 7:1 10:1	industries 251:1
included 39:14 71:22 72:1,5,7 92:7 188:19 197:2 292:18 299:22 315:12,19 317:3 318:11 325:16 327:18,21 328:2 328:12 337:10 340:8,19 343:18 373:19 460:13	increases 82:3 226:16	indicates 242:24 315:2	industry 86:22 179:12 251:21 252:17 262:10 310:14 351:11 352:1,19 358:14 368:20 374:14 375:10 376:3,23 384:4,18,21 385:9 385:12 388:11 392:20 394:24 395:15 396:15 416:1,5,19 419:12 419:15 420:19 432:4 449:18 450:7
includes 23:11 254:16 314:20 315:3,22 318:7 329:3 331:5 338:16 353:10 361:17 369:16 370:5 380:2 382:14,17 394:25	increasing 69:8,12 69:13,13 454:9	indicating 122:25 387:12 460:13	industry's 350:16
including 57:10,16 63:4 211:9 214:20 355:21	incredibly 40:4 58:16 77:16 82:16 113:21 138:1 153:9 199:8 253:11 259:25 262:9 404:14	indicted 62:16 63:11 64:14,22	ineffective 304:4 304:11 305:15
inclusive 28:15 64:5	incurred 188:25 192:10 214:23 215:1 220:24 222:22 247:10 258:8,9	indictments 63:4 64:7 65:8,20 66:14 148:16	influence 433:19 434:2,16 435:6,8
	incur 248:1 354:1	indigent 87:11 187:14	
		indirect 173:1	
		individual 42:6 60:2,2 98:9 106:15 133:13 189:9,22 272:6,7 277:17 286:17 292:4 305:19 323:9 331:16 424:9 425:10 431:22 432:2 440:23	
		individually 345:25	

influx 81:15 90:20 154:20 394:12	341:3,23 342:3,5 342:13,23 343:2	injury 191:4,9 192:18 196:13 205:7,8 242:17 333:10,11 393:13 432:1	intentional 155:1 228:5
inform 288:17 349:24	355:6 356:14 357:18 358:1	inmate 218:14	intentionality 236:22
informally 172:20	360:3 369:3,6,20	inpatient 229:11 239:2,14 320:20	intentionally 400:1
information 8:19 8:22 9:7,10 17:18 24:14 52:8 58:3 76:12 80:5 100:4 102:7,23 103:6,9 114:15,18,25 129:4 133:5,6,13 133:18,24 134:12 149:2 162:1 167:11,16,19 168:8,20 180:25 181:15 187:5 191:7 213:23,25 241:20 242:2 243:1 255:21 264:24 265:6,23 266:5 268:1 272:1 272:13,14 275:17 275:23,25 276:2,5 276:14,20 277:4,9 277:23 278:19 281:21 282:8,20 286:22 293:1,8 295:2,23 296:5 297:25 298:5,19 298:20 301:22 302:3,10,18 303:7 303:14,21,24 305:4,9,10 308:21 309:18 310:6 312:9 316:1 318:16,18 319:1 319:18 323:15,21 323:23,25 324:24 325:16,19,22 329:1 334:21	370:3 371:22 380:11 386:12 391:14 393:24 395:3,13 396:13 397:17 399:7,10 410:5 423:8 438:21 440:5 442:7 448:4,5 452:4 informed 122:18 374:13 380:25 415:5 ingram 166:13 ingredient 7:16 88:15 inherent 82:18 179:11,21 180:23 369:15 391:9 422:23 inherently 75:4 180:6 initial 100:6 279:13 285:1,9,19 286:11 289:8 294:13 438:18 initially 307:22 initiative 198:7,12 initiatives 198:24 201:13 243:17 244:7 245:1,5,21 246:4,8 injunction 19:13 21:18 injuries 35:9 191:25 192:7 194:14 204:4,24	input 326:5 350:8 inputting 441:24 inquired 140:10 inside 240:16 insight 296:12 insignificant 234:13 instance 91:1,3 106:11 189:14 198:6 instances 98:24 112:13 147:3,21 271:15 309:23 341:13 institute 363:16 instituted 156:17 instruct 19:2 36:9 instructions 62:21 457:2,10 insulting 413:4 insurance 228:20 229:3,5 276:8 278:1,14,16 319:6 324:25 325:8 insured 228:22 intended 96:19 263:1 intending 443:15 intensity 170:11 intensive 32:24 168:1 intent 157:20	interact 100:25 235:21 interacting 402:25 interaction 149:23 160:11 437:16 441:13 interactions 369:9 interacts 89:9 401:2 intercept 446:24 interchangeably 37:23 38:6 interdict 93:24 interdiction 94:2 447:4 interested 30:4 84:21 449:13 459:3 interesting 240:15 interface 163:1,11 interfere 14:8 internal 27:14 363:15 internally 297:9 303:12 interrogatories 7:24 8:3,8,10,16 128:9,16 136:7,14 171:25 264:4,6,17 268:2,20 269:2,20 269:22 270:16 272:18 274:22 277:5 281:24 282:10,21 283:4 284:17 287:12

289:10 292:15 293:13 299:11 309:17 313:12 315:18 323:22 324:10 327:3 340:5 343:23,24 344:7,15,17,19,24 345:24 interrogatory 7:20 31:13 118:2 118:10 120:4 128:20 191:1,13 272:23 273:1 275:19 278:25 281:22 305:14 311:1 314:21 326:14 331:7,13 335:19,20 338:14 339:8,10 340:2 341:22 343:7 344:8,8,9 345:5,6 345:6 349:17 431:20 interrupt 25:13 interruption 194:19 interval 217:21 227:6 intervened 99:22 110:23 310:21 intervening 425:16 interview 113:24 interviewed 227:18,19 intravenous 230:20 intrigued 272:11 introduce 177:9 introduced 177:11 431:5	introduction 42:23 invest 140:5 invested 201:11 216:8 443:6 investi 165:6 investigata 165:5 investigate 156:10 161:10 178:2,21 180:4 181:10 199:9 203:20 416:22 investigated 52:17 119:2,3,16 120:20 121:5,13 128:1 139:25 140:5 149:1 155:24 417:11 investigating 56:5 150:8 155:23 156:3,7 170:16 179:23 203:5 207:2,3 364:10 investigation 127:6 137:24 140:12 150:16,24 179:9 363:17 investigations 121:10 147:25 153:8,14,15 155:8 155:15,20 165:25 166:4 170:2 435:10 investigative 165:7 235:1 investigators 256:22 investigatory 143:5 investing 225:3	investment 195:16 195:17 253:13 investments 201:24 253:6 invitations 446:3 involved 24:14 42:17 112:15 116:2,22 147:14 170:15 209:12 245:4 359:19,21 374:25 424:18 428:15 449:2 involvement 120:3 121:6,25 139:12 139:19 involves 161:6 involving 21:25 87:7 120:24 137:11,15 158:16 231:15 inward 396:2 irrespective 401:22 irritate 413:22 irritated 413:6 ish 440:1 issue 95:14 107:16 156:24 198:19,20 212:14 214:8 250:20 251:8,15 263:2 268:2 357:6 396:7,15 issued 354:8,16,23 363:7 444:2 issues 198:17 213:5 214:11,12 225:24 226:9 355:12 371:2 393:1 403:1 420:21 452:25	issuing 88:25 389:8 item 197:7,15 231:20 items 219:21 220:14 229:23 397:25 j j 1:25 3:4 458:6 459:14 j&j 15:25 jackie 26:2,16 jackson 4:21 jacksonkelly.com 4:23 jail 44:24 160:16 205:13 218:11,15 218:18 447:13,15 447:16,19,21 james 4:21 janssen 3:3 15:25 january 1:18 14:13 88:10 213:18 281:1 288:1 291:4,4 459:8 460:4 jason 27:21 jdjohnson 4:23 jerry 372:25 373:3 443:4 jflowers 2:9 jim 16:11,13 job 19:24 20:7 154:11 180:19 214:6 252:25 277:2 393:14 407:11 438:1 jobs 250:19 252:25 349:18 jodi 2:5 15:9
---	---	---	--

[johnson - keeps]

Page 40

johnson 1:17 3:2,2 4:21 6:7 14:25 15:7,17 16:11,11 16:13,14,24 17:4 17:10 88:7 125:9 183:8,16,25 194:13 226:7 229:16 239:24 240:2,4 266:17,19 313:9 322:17 338:23 342:18 345:10 347:22 397:10 398:6,10 400:16 420:1 424:16 430:11,15 433:18 448:9 455:14,19,23 458:9 460:8 461:4 461:9 462:4,13 463:20 johnson's 370:12 395:18 joint 9:16 377:1,7 377:14 385:14,22 386:12,19,23 388:12,14,16 389:8,13,18 jones 2:13 15:19 jonesday.com 2:16 journal 407:21 409:22 414:19 judge 1:8 121:2 132:19 152:8 226:25 415:10 417:8 421:9 422:10 423:22,23 424:24 425:25 426:3,5,7 429:17 430:6,6 433:15 443:16	judge's 419:17 421:3 judges 164:14 200:16 227:16 247:1 410:14,23 449:5 judgment 115:10 116:25 judgments 115:14 julie 26:1 400:9,11 402:18 403:2 july 62:9 jump 158:8 juries 408:8 jurisdiction 247:22 jurisdictions 65:20 66:5 283:15 326:21 335:7 438:12 jury 19:11 21:13 46:23 405:1 409:17 410:21 414:2 443:16 justice 7:9 49:3 54:24,25 55:5 61:2,9 155:3,3 213:8 217:25 447:12	94:16 95:6 97:5 98:4 104:14 105:18 106:1,7 107:3 108:4 109:9 109:18 110:2,5,18 111:13 112:4,17 114:13 116:23 121:7,21 122:14 123:13 124:3 125:11 127:11 138:6 139:2 141:13 143:24 145:16 155:10 157:17 158:13 160:3 168:16 171:9 173:14 174:12 175:14 176:15 178:6,14 180:17 181:20 182:4,17,20,25 183:4,11,17 184:22 186:18 189:12 190:17 205:10 206:1,22 208:7 210:20 224:4 225:13,20 226:2,14,18 229:12 235:19 236:13 238:21,25 242:13 248:25 249:18 252:7 254:10 255:16,22 256:5,8,12,15 261:5,20 279:18 280:8,12 285:25 297:23 298:8,16 311:10 322:14 323:2,18 324:7,21 325:6,14,24 326:7 327:22 328:16 329:4 330:12	331:3 332:16 333:19 337:22 342:1,15 343:9 345:9,17 347:3,9 347:14,17,20 348:3,12,15 351:4 357:22 358:6 359:23 360:6 362:9 363:20 364:7 365:23 367:20 368:7 370:8 371:11,16 371:19 374:10 376:18 379:9 382:7 390:19 392:16 395:17 396:16 399:20 400:20 401:8 402:5,10,21 405:12 406:8 408:18 411:9,15 412:19,25 414:12 415:18,21 418:4 419:6,22 420:11 421:22 424:11 426:12 427:14,17 429:1,6,20,24 430:10,18 432:22 435:19 439:23 440:20 441:9,20 443:24 444:19 449:23 450:5 451:3 453:5 455:3 455:7,21 460:5 keep 91:24 186:3 190:16 249:11 299:16 322:16 339:4 345:18 422:5 keeps 98:13
	k k 3:14 5:3 kearse 2:4 8:5 15:5,5 23:8,14,20 23:24 29:9 36:5,8 36:13 40:15 41:3 49:21 56:16 59:15 67:5 71:24 72:17 77:13 78:24 79:12 80:14,23 81:13,23 84:9 87:1,14,21 88:3 92:3,10,23		

[kelly - know]

Page 41

kelly 4:21	68:17 69:25 71:12	138:18 139:3,4,7	219:10,12,21,25
kept 124:7 441:12	71:14 72:19 73:12	139:14 140:6,9,10	220:4 221:4,14
key 4:15 275:12	73:15 74:10,18	141:22 142:8,9	222:2,19 223:17
430:22	75:8,9,9 76:7,12	143:12,17,20	223:19 227:8,9,17
kicked 214:6	76:19,22,24 77:5	144:23,24 145:21	227:25 228:3,4,10
kid 35:22 175:3	77:14 78:3,4,12	146:11,14,15	228:22 229:13
259:10	79:4,13,14,25 80:7	147:8,9,14,16,22	230:14 232:11
kids 103:20	80:7,10,15,21	147:23,24 148:2,9	233:5,17,25 234:3
174:24 194:10	81:18,21,24 82:1	148:20,23 149:5	234:5,5 236:14,21
257:16 258:10,19	83:7 84:4,17	150:15,25 151:16	238:13 240:20,21
killed 81:16 412:4	85:16 86:3,9,10	151:24,25 152:10	242:7,11,17,19
kind 101:9 114:16	87:8,12,15 89:5,15	152:11,11,14	243:25 246:8
167:25 231:24,25	89:19,25 91:3,6,10	153:6 154:8	248:10,11 249:5
233:16,19 250:7	91:16 92:15,24	156:21 157:18,19	249:22,24 251:9
279:11 288:25	93:20 95:12 96:5	158:14,25 159:1	252:3,3,23 253:4
289:3 290:16	97:18 98:15 99:21	160:4,5,14,15	254:9 255:15
363:14 378:8	100:7,21 101:19	161:14,17,18	256:20 257:1
411:11 444:23	101:20 102:8,12	162:9,25 163:4,5,5	258:14 259:8
kinds 20:24 21:6,7	105:19 106:2	163:8 164:7,9	260:13 261:11
knew 75:4 108:9	107:19 108:3	165:2,10 166:5,6	262:22 263:5,13
111:11 116:13	109:3 111:4,7,18	166:12,21 168:19	271:13 272:5,12
152:12,15,25	111:22 112:19,22	168:20 170:1,20	275:8 276:7,9,17
153:5 177:9 224:7	112:23 113:11	170:24 171:17,21	277:12,25 278:3,7
224:7,9 242:14	114:14,16 115:18	172:18 175:24	278:12,17 281:4,6
253:10 399:1,2,3	117:15,20 119:14	176:24 177:2,3,6	281:19 284:25
399:11 408:21,25	119:18 120:1,2,18	177:15 178:24	294:13,16,23
409:1 426:5	120:21 121:4,10	179:4,18 181:18	295:1,8 296:3,22
knife 141:24	121:13,16 122:16	185:5 187:8,10,23	299:10 300:7
know 18:3,9,21	122:24 123:6,12	188:6,8,11,18	302:21 303:11,13
25:23 28:16 29:14	123:14,15 124:5	193:13 194:9,10	303:20,24 306:7
30:1,3,10,12 31:11	124:18,19,19,20	197:8 198:1,12,18	309:23 310:12
31:16 34:5 35:11	124:20 126:9	198:25 199:6,11	311:11 312:12
35:16 37:25 40:2	127:8,16,19,24,25	199:16,23 200:8	317:14,15 318:10
41:9 42:11 45:11	128:3 129:17,18	201:4,11,13,19,20	318:25 319:4
46:14 47:17 49:15	130:12,12,14,24	201:23 202:10,13	320:10,24,24
50:13,15,16,17	131:16 132:5,7,10	202:15 203:17,18	321:1 322:21
53:22 55:2,16,20	132:11,18 133:16	205:13,18 207:18	323:10 324:11,19
57:6,20 59:1,5,17	133:19,20 134:11	207:20,21 209:7	325:3,9,11,18,20
59:17,19 61:19,22	134:14,24 135:5,7	210:17,17 212:2	326:1,2 327:10,11
62:2 63:23 65:2,3	135:15,16,21	212:20 215:5	327:24 328:2,10
65:8 66:4,7 68:14	136:1 137:16,19	216:13 218:20	328:25 329:6

[know - layer]

Page 42

330:14,18,21 331:24 332:4,6,18 334:9 336:20,23 337:3,13,17 338:12,13,15,21 340:1,7,11,23 341:8,20 342:5,21 343:16,16,17,20 345:15 348:1,1,15 348:24 349:4,13 353:20,21,23,24 353:25 354:3,7 356:1,11,16 360:7 360:22 365:6,8,10 367:1 369:5,17 370:3,15 374:2 375:7,23 380:24 381:8,10,12 382:9 382:10 384:9 385:8 388:10,13 388:16 389:12,17 389:21 392:21 399:15 405:6,14 410:10 412:1 413:2 415:13 417:3,7 423:18 425:18 426:18 432:15,15 434:10 435:4,9,23 436:1 436:14 437:6,15 439:14,24,24,25 440:2,21,22,25 441:11,12,24,25 442:5,7,24 444:8,9 444:9,10,14,20,21 444:22,23 445:18 447:25 449:6,8 450:15,16,17 452:6 453:21 454:24	knowing 109:15 knowingly 113:16 334:18 knowledge 30:25 35:7 53:14 58:1 87:5 213:8 242:10 276:19 294:19 339:19 346:17 355:17 366:9 367:15 406:21 408:2 409:8,12 410:2 450:13 knowledgeable 403:6 407:13 452:23,25 known 35:16 51:19 52:8 87:3 137:23 143:4 144:12 152:23 338:8 391:17 395:6 knows 100:17 165:19 kohler 26:3 58:24 82:1 208:11 245:19 337:2,4 411:22 kouba 2:5 15:12 15:12 I I 398:25,25 l.p. 1:11 laboratories 3:14 5:4 laced 85:1 86:10 86:19 lack 44:25 114:5 133:8 139:17 162:18 174:16 181:14 216:18 299:8 300:5	304:20 ladies 404:25 409:16 lakemore 66:12 240:14 land 216:6,7 239:5 239:15,19 240:8 240:13 307:14 landlocked 240:15 landlord 215:23 lands 411:7 lane 60:2 95:9,10 95:10,11 396:6 410:22 lanes 396:25 large 78:16 79:6 90:25 91:2,22,24 94:13 109:6 116:17 126:4,22 127:2,10,15,23 138:1 158:23 240:8 250:18 403:22 largely 94:9 larger 123:25 largest 123:21 125:24 126:18 215:20 229:11 laser 93:22 198:4 late 43:17,25,25 44:15 46:10,19 54:7 55:22 56:15 57:4 58:4 59:12 116:6 141:20 221:7 311:12 367:23 413:3 431:4,8,14 437:8 450:20 451:2,22 latiera 5:6 125:15 latiera.rayford 5:8	laughter 256:14 laundry 38:17 law 27:21 58:12 71:4 82:14,20,24 107:24 115:1,5 116:16 121:14 140:16,25 141:19 142:24 158:21 159:6,18 160:8,11 160:12 166:10 167:4 168:2 169:8 177:25 178:20 181:9,16 199:5 200:12 203:3 206:12,19 213:16 221:20 222:2 234:3,6 235:21 244:15 310:21 363:9 408:1 410:8 440:8 445:20 448:4,14 449:3,4 lawful 16:24 39:22 laws 177:24 178:16 179:7 181:5,8 209:3 364:6 lawsuit 43:8,9 149:22 171:13 363:23 364:12 365:13 395:24 449:22 450:8,13 451:1,24 lawyer 17:19 18:24 425:20 426:16 lawyers 27:16,17 151:14 168:11 205:19 lay 175:10 layer 179:21
--	---	---	---

[layperson - list]

Page 43

layperson 328:6	legislators 156:23	364:22 404:7	240:25 241:1
lead 63:12 334:19	157:21	417:6 428:8 446:9	245:25 248:2
leaders 446:4,5	legislature 19:19	levels 102:24	412:6 440:23
447:19	19:23 21:21 44:1	154:10 261:10	441:13
leadership 446:4	173:21 224:15	305:4 338:2	linda 9:1 265:12
leading 59:1	225:2 442:12	leverage 212:1	280:11
leads 86:11 260:22	legitimate 51:19	216:2 451:11	line 114:11,20
375:9	104:7 126:5,24	leveraging 255:3	205:20 219:21
learn 360:11	legitimately	levy 196:21,22	220:14 221:14
391:25	104:21 105:10	223:12,13,14	225:21 226:15
learned 119:2,3	450:22	249:22	228:2 229:23
124:5 292:8 352:6	length 316:16	lewis 3:9,15 5:5	256:25 460:13
352:8,25 355:7	lengthy 137:25	16:2,4 125:15	462:7 463:3
357:21 391:1	leniency 159:17	license 184:16	lines 69:16 147:5,5
392:3	lent 213:9	licensed 180:8	329:15
leave 19:22 168:17	leonard 24:18	184:9	lining 154:4
203:13 205:18	59:2 140:8,9	licenses 116:1,8	lisa 26:3
leaving 33:25	149:5 151:17	lieu 159:8	list 38:17 119:6
114:23	152:18,19,21,23	life 20:1 34:3	120:19 122:22
led 316:22 334:2	154:9,18 163:25	177:18 192:22	123:14,20 125:23
337:2 375:13,23	165:13 167:14	308:9	126:12,13 182:24
376:16 381:1	169:21 204:10	lifestyle 60:19	189:8,21 191:8,15
left 155:12 216:11	349:20 356:3	394:18	191:23,24 192:6
249:3 330:16	381:18	lifted 116:2	192:12,14 196:13
387:22	leonard's 165:15	lifting 365:11	197:8,9,13 280:20
legal 5:11 96:15	letter 8:4 9:1 23:9	light 368:12	285:9,13,14,19
332:18 419:10	23:15 182:3,17,21	436:25 450:23	286:11,13,25
420:7 425:12,14	265:12 267:8	likelihood 307:13	292:19 293:15
438:11 460:1	280:9,11 281:1,11	321:10	300:10 306:11
463:1	281:16,20 282:8	likes 227:3	307:2 312:24
legality 45:15	282:20 284:4,14	likewise 26:25	315:2,12,14,17,22
179:11 180:13	288:1 291:22	200:16 255:2	317:3,20 319:12
legally 180:14	299:23 315:21	limit 99:3 229:9	320:1,7 323:9
184:6	317:2 318:7,9	365:12,20	324:2,3 327:17,21
legislation 140:23	460:19	limitations 326:18	328:12 329:2
legislative 156:18	letters 280:3	365:3	330:11,20 333:2
legislatively	level 44:22 45:15	limited 20:4	337:2,11,13
142:15	50:9,20,25 70:5	100:15 113:21	340:14,20 343:18
legislator 19:15	77:23 166:5 207:7	114:7 158:5	345:3,4,19 411:22
20:11 413:17	252:2 290:8	164:17 193:17	428:18
438:3,4	313:18 328:9	219:2 230:11	

[listed - lot]

Page 44

listed 66:9,21 68:11 69:2,6 120:19 121:22 122:7 135:18 145:1 171:24 183:15 189:10,23 194:16,24 219:2 292:21 294:9 300:21 309:20 315:20 316:3 336:21 337:15,21 339:16,22 340:2 341:22 343:21 349:14 382:20 397:16 462:7,17 listen 426:19 listing 9:11 266:10 338:16 462:7 lists 182:22 284:2 319:22 333:25 340:16 341:2 346:6 lit 384:17 385:10 literally 45:1 93:18 175:2 452:2 litigation 1:6 14:20 151:15 168:12 353:7 460:6 461:3 462:3 little 30:6 50:14 80:9 88:1 149:15 168:23 172:13 258:25 284:24 304:7 314:17 349:21 350:22 357:24 366:16 379:2 417:9 live 352:3 378:5 399:14 403:8 410:22	lived 177:17,19 220:8 410:19 lives 76:18 192:17 199:21 396:3 451:5,20 living 30:23 31:21 216:9,10 257:19 257:23 llc 2:4 3:13 5:3 llp 2:19 3:4,9,15 4:3,7 5:5 local 152:5 223:12 223:19 244:15,17 446:6 locate 239:20 located 14:16 240:13,14 location 22:22 251:18 locations 244:8 lomax 2:14 15:18 15:18 long 19:18 52:4 77:19 93:2 154:7 162:6 171:1 176:18 178:4 214:3 240:19,22 337:25 369:11 392:7 412:11 445:3 longer 26:14 44:7 97:15 98:13 167:12 200:4 207:23 241:9 252:22 330:5 392:11 394:19 443:7 look 29:16 30:11 50:14 71:1 87:10 118:19 120:24 127:6 129:13	136:24 183:5 187:11,17 188:21 188:23 190:23 191:15 192:2 232:23 237:24 251:10 252:18 261:4 272:21 275:10 290:18 321:12,19 323:7 325:18 330:24 331:1 347:23 349:1 366:13 374:3 376:3 385:18 402:17 409:23 415:7 444:25 looked 28:17,19 28:21 30:8 58:14 122:17,19 127:9 127:14,22 130:18 187:12 188:10,16 291:23 300:8 310:4 321:8,20 328:24 332:7 358:8 377:24,24 380:13 381:6 399:22 417:10 427:23 428:4 432:14 437:7,13 looking 28:17 60:1 66:19,20 82:25 100:15,16 117:6 157:6,7,8,11 164:11 169:9 183:6,7 188:2,13 194:4,5 239:13,15 248:7,17 251:18 252:10,12 258:12 261:13 284:8 294:18 295:9 314:16 351:13	382:9 389:24 418:8,9 looks 22:19 172:8 189:13 274:7 286:25 379:2 412:4 loop 290:16 lori 24:20,24 27:23 350:9 loss 192:15,22,23 192:24 193:16 194:7,7 195:21 196:8 220:21 250:2,8 432:9 losses 192:10 193:12 197:15 220:24 lost 34:10,17,18,19 95:16 96:2 192:17 196:9 197:18,22 199:24 239:11 241:6,24 279:8 371:5,17 376:4 398:18 lot 20:6 25:2 29:17 35:14 46:6,7 94:10 126:5,23 138:7 145:11 150:21 153:20 162:16,16 168:1 187:6 195:24 198:9 199:13 211:21 215:4 224:16,19 228:13 228:21,22 229:3,4 232:4 238:5,8,14 245:1 250:21 251:1 338:15 432:23 439:18 440:5 452:9,10
---	--	---	---

[lots - marountas]

Page 45

lots 203:25 211:17 228:23 296:22 low 44:22 64:5 70:8,15,23 71:8,13 252:6 400:5 405:20 lower 70:20,25 71:9 252:25 290:1 290:2,6 444:6 lowered 294:20 296:1 luck 168:1 luckily 175:23 257:20 lucky 194:1,2 lucrative 145:15 lunch 178:15 181:21	maintains 314:5 maintenance 369:12 major 192:10 majority 81:5 174:11 410:15 makeup 198:10 making 51:24 66:3 141:3 157:4,5 169:6 195:7 208:4 208:8 253:7 286:9 415:2 man 53:11 104:3 358:18 manage 431:5 managed 330:3 management 145:13 382:25 383:9,13,23 384:5 387:5,13,15 430:23 431:1 446:19 mandatory 153:11 162:15,17 167:17 mangled 315:6 manner 46:16 manufacture 43:11 manufactured 105:13 179:14 338:18 manufacturer 8:8 8:15 9:3 100:10 105:12 171:6 264:2,15 265:15 269:19 270:15 274:13 275:12 289:10 293:12 308:16,25 309:5 309:21 310:9 311:2 312:5,17	313:12 329:22 331:6,12 335:18 339:8,10 341:24 355:1 369:4 manufacturer's 393:24 manufacturers 99:22 100:5 101:4 101:6 171:21 180:21 306:19 310:3 312:23 338:19 341:11,17 342:12 343:2 351:17 353:4 354:5 355:11 356:22 360:13,17 362:6 363:12,18 364:4,15 365:21 369:14 374:23 375:5,14 384:23 395:1 450:3 manufacturing 105:15 171:6 250:19 251:19 352:19 353:11 mapping 446:24 marijuana 39:9 63:5,15,16,25 85:1 99:14 401:7 402:2 mark 22:2 47:20 61:1 67:14 88:9 117:23 128:5 133:20 134:15,16 135:8 136:3 182:16 190:7,8 marked 7:2 22:9 48:4 61:12 67:22 71:2,13,15 88:16 118:12 128:16 136:14 182:5 190:7 264:7,19	265:1,8,18,25 266:6,12 269:16 270:10 273:10 278:21 280:4 292:15 294:11 330:23 336:15 378:16,20 379:7 386:1,4 397:16 442:19 market 44:12 93:7 365:21 marketed 78:18 392:4 marketing 79:7 189:1,10 274:14 308:17,25 309:6 309:21 310:10 311:2 312:5,8,17 312:21 333:6 346:19 355:1 357:2,3,9,15 358:12 359:16,19 360:2,4,25 361:1,2 361:3,14,21 362:7 364:11,17 365:7 366:11 367:18 368:6,23 371:24 372:2,9 374:7 384:6 390:15,16 390:22 391:1,14 395:10 415:24 416:3,6 445:7 marketplace 392:19 markets 51:18 marking 71:8 182:19 marks 29:14 70:7 marountas 74:2 439:18
m			
m 2:6,14 ma 306:2 ma'am 25:22 33:5 33:11 221:18 349:3 406:21 412:6 413:20 424:7 430:3 441:3 machine 176:7 madam 460:10 magic 172:11 261:2,7 262:6 magistrate 132:19 281:8 417:8 mahoning 20:16 mail 7:11 23:18 67:14,19 68:1,7 267:9 main 3:5 107:15 maintain 316:10 394:18 maintained 206:10,18 207:5			

[master - mentioned]

Page 46

master 7:21 9:2 118:3,11 265:13 267:17,21 268:8 269:5 274:21 281:2,4,16 282:13 294:21 305:19 306:3 347:8 349:6 366:21 397:15	178:23,23 179:6 181:13 204:6 210:21 223:19 226:3,4 227:25 228:22 229:13 230:20 231:10 233:9,19 235:15 236:5 242:4 254:7 258:2 261:7 262:6 263:11 310:19 322:19 325:17 327:14 328:6 337:23 340:22 346:4 351:13 363:21 364:9 369:8 371:17 374:11,18 379:10 384:21 394:7,8 441:21 442:3 447:2 452:2	113:3 115:25 116:19,20,21 117:1 135:15 156:24 159:15 161:12 164:16,19 176:1,5 178:25 184:9 187:13 194:18,24 195:13 199:23,25 207:22 208:10 211:8 214:19 216:23 217:14 218:17 221:12,17 223:2 226:21 228:16 230:5 231:15 232:5 233:6 245:20 276:6 278:12,15 291:12 296:8 303:17 325:1,11 336:24 337:17 369:7,15 376:10 387:11 407:20 414:18 452:21	meeting 32:1 58:12 59:3 312:4 361:7 368:21 371:23 372:1 396:12 435:13,22 436:19 437:12 438:21 440:11 447:14 448:22,23 449:16 450:9 453:19 454:6,13 454:24
match 384:17 385:10			meetings 73:19 212:25 245:2 351:8 352:11 355:14 362:4 368:19 372:4 379:18 405:17 410:6,7 411:19 435:23,24 436:12 436:15 448:2 451:14
materials 319:24 325:4 353:22 357:3 391:2,5,15			meets 328:13
matt 25:25 61:25			meh 262:2
matter 21:19,21 235:16 313:18 373:24			member 80:25 169:20,22 241:16 259:24 260:5,7,9 260:16 435:16 436:21
mattered 30:16			members 101:24 179:16 194:4 242:3 352:20 411:21 446:11 449:10,13,13
matthew 67:15 68:12			memorized 287:2
matz 27:21	meaning 39:12 160:10 334:21 394:3,4 420:7	medically 96:15 135:11,19 304:4 304:11 305:14	memory 135:24
mcginness 2:4	means 33:7 96:13 117:14,15 203:12 257:21	medication 241:18 242:16 243:25 245:24 375:2	men 215:21
mckesson 4:2 16:7 16:9	meant 30:10 135:11 198:2 256:6 383:8 431:24	medications 96:14 172:17 180:22 244:9 306:25 361:8	mental 184:20,25 236:18 238:1
md 1:7 14:23	measure 54:24 207:12 251:9	medicine 102:19	mentioned 181:11 342:4 362:22 367:14,16
mdl 1:6	measures 54:10,12	mee 30:9	
mean 36:17 42:3 64:2 72:12 78:6 80:3 92:11,25 96:12 97:13 101:18 104:2 106:23 110:7 111:5 112:5 115:7 117:6 119:11,18 121:8,12 122:15 124:1 127:12 138:7 139:8 140:21 146:11 163:13 168:7 171:10 174:13 175:21 176:17	media 7:14 88:10 88:13 medicaid 220:6 228:6,19 229:2,8 365:11,12 medical 26:5 40:10,17,24 45:2 58:22,25 112:2	meet 93:8 210:10 288:4 292:22 293:5,13 294:8 327:20 436:8,9,12	

[mere - months]

Page 47

mere 127:1	milligrams 321:9	misrepresentatio...	328:9,14
messaging 155:2	332:24	273:5 326:22	mobile 176:2
306:18 353:3	million 72:22	misrepresented	mobilized 241:12
met 24:6,16,18,23	94:19 104:3	329:23 334:18	446:18
24:25 27:7,12	111:20 176:20	missed 114:9	modification
32:2,2 153:2	186:2,8,10,16	251:13	415:9
266:22 292:18	188:6,19 321:20	missing 192:9,11	modifications
367:22 436:14	334:11 358:13,15	192:13 195:18	22:18
448:16	358:23 394:13	206:24 255:18	modified 22:21
metabolize 338:5	millions 175:19	mission 443:7	282:12 349:6
meth 82:9 83:22	mills 108:17,21,22	misstate 420:13	366:21 397:15
249:3 402:3	430:15,19	misstates 13:3	421:3
methadone 257:24	mind 71:13,14	396:17 406:9	mogadore 66:12
methamphetamine	200:22 299:16	413:1 420:11	450:16
38:25 63:5 84:8	400:22 402:12	422:20	mom 260:3,13
84:11 85:5 99:13	mind's 436:18	misstating 424:12	moment 349:8
259:21	mindset 117:9	mistake 157:14	moms 154:9 231:6
methamphetamine...	mine 134:8 158:25	mistaken 357:13	231:6
84:14,25 401:6	277:16 302:1	misunderstood	monetize 193:19
methodology	303:12	110:9	195:4
302:22 306:17	mine's 348:1	misuse 290:10	monetized 193:12
326:2 329:6 332:5	mined 442:1	305:5 307:13	194:6
methods 92:7	minimum 252:25	355:23 445:8	money 176:1,4,10
metroparks	minority 20:5	mitigate 185:23	187:19,20 196:22
249:21	174:6	201:25	199:17,19 201:1,4
mexican 92:8	minute 66:18	mitigated 176:16	201:6,12 208:4,9
mexico 90:16	189:6,20 236:3	mix 85:23	209:25 210:5
miami 2:15	279:9	mixed 39:2,3 89:1	215:4 247:15,22
mic 397:12	minutes 455:3	90:23 91:5 94:15	248:14 376:2
microphone 339:1	mischaracterizes	mixing 85:21	446:23 452:9
microphones 14:3	89:11 395:18	91:10	monies 187:14
14:7	402:10	mme 283:18	monitor 44:3
mid 89:4	mischaracterizing	284:20 285:4,12	244:12
middle 379:24	430:9	286:4,13 287:19	monitoring 221:5
380:1 387:24	misconduct 178:3	288:8 289:16	monster 59:25
midwest 460:17	178:22	290:5,9,11 291:7	451:7
463:1	misdeemeanors	293:14 294:15	month 148:18
mill 108:15 146:2	63:19 438:19	295:5,25 303:6	233:22 436:2
miller 193:14	misleading 391:4	307:1 308:3,6,15	monthly 447:14
milligram 44:9	misremembering	309:8 311:22	months 19:21
263:12	378:5	313:17 314:9	20:17 32:17

[moral - non]

Page 48

moral 156:24 morgan 3:9,15 5:5 16:2,4 125:15 morganlewis.com 3:11,18 5:8 morgue 176:3 morning 15:8 16:12,15 17:6,7 32:12 266:22 414:15 428:5 morphed 188:14 morphine 30:11 37:13 38:2,16 42:22 44:12 85:2 130:20 332:23 338:5 mother 412:3,3 mothers 193:23 motion 9:3 265:16 motley 2:4 15:6,9 15:12,16 24:7 motleyrice.com 2:8,9,10,11 move 70:9 211:6 214:14 263:18 321:10 346:8,10 426:14,22 430:1 442:15 moved 401:4 moving 446:21 mt 2:7 multiple 19:13 24:13 97:1,3,4,11 140:10 141:8 152:25 239:15 256:17 281:10 381:14 multiply 358:21 372:22 437:14 439:2	municipal 204:13 246:12 247:2,3,4 438:13 mute 194:22 mutual 276:6 278:12,15 291:13 303:17 325:1,11 myriad 199:9 n n 4:14 69:8 naive 376:11,12 naloxone 236:1,3 name 14:11,24 17:8,9 27:18 61:24 68:11 74:18 74:21 134:7 240:24 266:21 275:12,13 281:9 283:15 398:10,20 398:22 414:5 439:17 460:6 461:3,4,15 462:3,4 462:21 named 27:12 38:15 135:22 171:23 458:9 names 9:11 129:13 135:21,24 145:5 266:10 299:20 340:6,10 narcen 452:4 narcotics 51:1,17 52:15,23 169:25 narrative 333:9 380:6,7 382:22 391:18 nas 44:21 47:14 national 1:6 7:12 8:9 14:20 67:20 68:2,9,14 264:4 269:21 460:6	461:3 462:3 natural 307:19 naturally 37:14 42:21 nature 75:22 141:5 236:15 353:3 392:3 near 329:13,14 387:2,18 nearly 66:2 175:23 186:1 204:20 necessarily 124:1 130:5 383:16 necessary 135:12 135:19 170:17 need 44:22 54:18 55:3 66:18,24 105:10 108:3 109:7,16,19,20 111:19 114:6 173:17 182:24 183:15 191:19 200:13 227:23 235:20 239:22 240:6 250:17 258:18 291:17 331:1 348:18,21 365:9,10 370:19 393:19 needed 109:21 143:1,2,3,3 173:19 175:24,25,25 224:3 302:24 322:2 needle 202:22,24 230:12,16 232:11 233:5 242:19 404:8 needles 58:18 230:22 233:4 245:15 249:15	needs 166:6 175:8 210:10 232:9 258:3 nefarious 124:9 157:20 negatively 34:9 neighborhood 408:21,25 neither 115:6 nelson 87:18 88:6 186:24 187:8 225:22 226:6,19 229:14,21 249:20 254:6,8 255:17,19 255:20 nelson's 27:6 never 40:22 89:22 102:15 119:12 199:15 253:10 258:16 286:17 305:20 381:17,20 new 52:17 141:21 153:18,20 154:20 196:3 201:25 213:18 251:4,5,19 256:21 289:23 362:12 396:20 441:22 news 35:13 109:4 newspaper 193:20 251:10 non 57:12 63:1 158:2 224:20 260:7 286:3 312:12 316:7 392:6 397:18,25 415:15,22 418:23 419:24 421:14 422:13 424:5 425:18
--	---	--	--

noodle 158:8	nuisance 257:8	nurse 184:11	11:9,10,11,12,12
normal 54:9	number 7:2,20	nurses 112:9	11:13,13,14,14,15
normally 200:17	28:11 53:1 62:16	115:18 116:14	11:16,16,17,17,18
norms 310:14	64:14 65:25 67:16	154:9 252:20	11:18,19,20,20,22
north 3:5	69:6 73:23 82:5	nursing 112:9	11:23,24,24 12:2,2
northeast 89:7	104:2 111:7	115:25 116:8	12:3,3,4,4,5,6,7,7
150:13 253:12,16	115:20 118:10	117:3,4,18,21	12:8,10,11,11,13
253:21	124:8 145:3 148:2	o	12:13,14,15,16,16
northeastern	148:14,15 174:19	oar 158:4	12:17,18,18,19,19
89:14 90:5 92:8	175:1 187:21	oarrs 44:3 57:23	12:20,20,21,21,22
northern 1:2	198:20 199:18	71:3 99:8,10	12:22,23,24,25
14:22	225:1 226:11	107:20 113:20	13:1,1,2,2,6,6,7,7
northwest 2:20	234:15,22 243:24	114:7 140:12,18	13:8,8,9,10,10,11
4:8,22	250:16,17,20	141:7,9,10,11,15	13:11,12,12,13
nos 9:5 265:18	253:14 256:18	143:22 146:17,21	18:24,25 41:3
282:10 283:5	267:4 279:5 307:4	146:23 150:20	49:21 56:16 59:15
287:12	308:20 323:8,8	153:10,11 156:9	71:24 72:17 77:13
notable 53:11	347:4 354:12	157:15 158:4,12	78:24 79:12 80:14
notarized 460:14	358:9,16 368:10	161:10,24 162:2	80:23 81:13,23
notary 458:6	372:20 373:12	162:23 163:6,7,21	84:9 87:1 92:3,10
459:14 460:25	382:18 387:20,21	163:23 164:1,3,5,7	92:23 94:16 95:6
461:10,18 462:15	388:5 389:3 395:5	164:15 165:1,4	97:5 98:4 104:14
462:23 463:23	407:17,24 410:1	166:10,25,25	105:18 106:1,7
note 14:3 23:9	410:12 411:1	167:11,16 168:22	107:3 108:4 109:9
29:15 55:1 188:21	412:9,10 413:23	181:14 359:1	109:18 110:18
393:9 460:12	427:15 433:16	439:11,13 440:1,4	111:13 112:4,17
noted 298:24	437:13 438:24	440:12,18,22	114:13 116:23
324:17	439:20 440:14	441:6,13,17 442:4	121:7,21 122:14
notes 29:1,4,7,11	460:7,13	442:9	123:13 124:3
299:15 329:21	numbered 270:2	oath 19:8 110:21	127:11 138:6
330:10,14,19	331:10 335:15	113:11 144:11,16	139:2 141:13
397:3	numbers 28:25	object 10:2,4,4,5,5	143:24 145:16
notice 7:3 22:4,7	47:12 64:22 109:6	10:6,6,7,7,8,8,9,9	155:10 157:17
22:13,25 23:25	138:1 139:3,4	10:10,10,11,11,12	158:13 160:3
33:4 44:16 183:7	152:7 162:20	10:12,13,13,14,14	171:9 173:14
188:22 295:18	169:6 186:11	10:15,15,16,16,17	174:12 175:14
346:14 366:14	187:4,7,25 254:22	10:17,18,18,19,19	176:15 178:6
noticed 43:19	258:13 270:24	10:20,20,21,21,22	180:17 184:22
notion 396:4	350:19 373:4,22	10:22,23,23,24,24	189:12 206:22
november 270:6	403:24 439:15	11:1,1,2,2,3,3,4,4	208:7 210:20
	462:7	11:5,5,6,6,7,7,8,8	224:4 225:13

[object - offset]

Page 50

235:19 236:13	12:24 13:3,4,4,5,5	obviously 31:23	163:14 164:20
242:13 249:18	13:9 36:5 40:15	163:6 164:18	166:2,14 176:1,5
252:7 254:10	133:8 186:21	215:4 244:11	187:16 193:11
256:5,13 261:5,20	205:1,10 248:25	341:19 349:21	194:24 199:24,25
271:12 276:24	274:19 279:24	occasionally 159:3	203:10 204:15
279:18,19 282:23	281:18,25 296:6	159:12	207:23 208:11
285:25 299:7	298:24 300:15	occasions 55:7	215:11 221:12,17
300:4 303:1 304:5	301:20 302:7	152:25	250:12 256:23,24
304:13,25 305:16	307:25 312:18	occur 97:12,14,23	336:24 441:23
306:6 309:1 318:2	321:6 324:17	98:21 116:4,5	459:6
318:22 320:9	325:6,14,24 329:4	166:4,7 221:21	officer 17:18
321:18 326:7	330:12 332:16	225:14 393:5	103:16 113:23
327:22 328:16	342:1 343:9 360:6	occurred 53:10	149:12,17,25
332:15 337:22	371:9 396:16	79:8 102:25	159:10 169:22
340:21 351:4	399:20 408:17	107:18 116:15	187:5 208:19
357:22 358:6	419:23 421:20	146:9 358:3	209:1,3,4,7 213:24
362:9 363:20	425:5 426:2,13	occurring 37:14	213:25 234:18,19
364:7 365:23	441:9	42:13,22 94:10	officers 58:12 65:7
367:20 368:7	objections 7:19,23	101:21 116:6	65:13,15 89:9
374:10 376:18	8:2,7,14 118:1,8	147:1 186:5	94:1 141:20 150:4
382:7 390:19	118:24 128:8,14	417:14	150:22 151:18
392:16 395:17,17	129:3 136:5,12	occurs 97:8	158:22 164:6,14
400:20 401:9	264:2,15 269:19	101:10 107:8	166:24,24 168:3
402:5,21 405:12	270:14 299:10	october 354:9	169:24 178:1
406:8 408:18	326:18	382:4 442:19	179:22 203:23
411:9,15 412:19	obligation 175:7	446:17 454:7	209:6,12 221:5
412:25 414:13	obsolete 354:22	offender 160:10	227:16 232:22
418:4 419:6 429:1	378:9 442:23	offenders 160:22	233:1,2,10,11
429:6 430:18	443:15	offenses 21:10	234:4,6,8,23,25
432:22 435:19	obtain 21:8 43:23	151:19	235:8,25 246:24
439:23 440:20	46:11,15 54:13	offer 183:20	434:13
441:20 443:24	57:14 147:5 156:1	231:11	offices 137:23
444:19 449:23	221:3 275:22	offered 19:24	150:14 423:1
450:5 451:3 453:5	277:4 279:10	offering 60:4	official 281:8
objecting 256:7	obtained 275:17	office 7:8 17:15	461:15 462:21
objection 10:1,3,3	276:5 301:25	20:17,21,22 24:22	officials 351:24
10:25 11:9,10,11	312:15	26:5,15 43:20	407:25 408:1,2
11:15,19,21,21,22	obtaining 56:24	45:3 48:19 55:18	410:9 446:5
11:23,25 12:1,1,5	57:1 96:13	61:2,8 73:10	447:18 449:11
12:6,8,9,9,10,12	obvious 199:3	107:12 112:25	offset 392:9
12:12,14,15,17,23		138:8 149:11	

[oftentimes - opioid]

Page 51

oftentimes 84:24	61:21 62:18,24	287:23 288:21	108:25 131:13
oh 28:18 48:25	63:2 64:2,8 68:4	289:7 291:6,8,9,19	135:22 183:15
120:21 122:23	68:18,21 70:11	291:21 295:16	185:9 230:21
127:20 129:25	77:25 79:15 80:8	311:15 313:2	237:18 370:1
138:23 155:24	81:10 102:5	314:25 335:4,16	447:11
173:22 174:1	104:19 109:23,25	335:22 336:7,13	ongoing 28:21
190:6,19 222:4	109:25 110:4	336:13 339:3	447:11
223:5,25 224:2	118:21 119:14,22	344:2,21,25 345:8	onset 45:10
228:3,21 238:19	119:22,25 122:23	345:17 346:9	oops 240:1
240:2 256:6 271:8	125:19 126:20,20	347:10,14,17	op 1:11
277:24 280:19	127:20 128:23,25	348:16,18 350:24	opana 38:16 39:17
320:21 325:9	128:25 131:5,8,20	361:13 369:14	315:5
336:13 339:2	132:7 133:4 136:2	370:18 371:11,19	open 90:18 91:8
344:25 347:6	137:2,4 142:10	379:5 386:5	155:12 409:3,9
360:19 361:13	148:7 152:13	387:23 390:24	operate 253:19
370:18 441:5	162:9 163:19	398:5 399:17	255:9,9
443:18 452:24	164:22 171:16	400:7,15 404:19	operating 145:23
454:11	178:8,11,13,18	406:4,20,23	351:24 391:13
ohio 1:2,11,22 3:5	183:3 185:20	409:16 412:22	operation 146:1
4:16 7:6,8,18,22	189:17 190:24	413:20 415:7	operations 200:4
8:1 9:13 14:17,22	191:18,20 192:2	416:7,16 418:14	447:19
17:11 19:14 21:11	192:11 194:13	418:14 419:1	opiate 1:6 14:20
47:22 48:2 61:2,8	197:12,14 202:3	423:15 427:5,17	37:13,16,21 73:19
89:7,14 90:5 92:9	208:3 209:23	429:25 430:1	222:9,13 245:2
117:24 118:7	211:2 214:16	431:1 434:1,7,19	328:21 350:17
128:7,13 136:4,11	217:3,6 222:23,25	435:12 437:24	351:8 356:13,24
150:13 216:3	223:8 226:17	438:8 439:12	362:1,25 367:22
253:12,16,21	235:10 237:9,20	441:5 442:14,17	379:17 405:17
255:9 276:6	238:19,25 240:1	443:11,22 444:4	410:3,6,7 429:11
278:13,15 291:13	242:1 243:5,12	445:1 448:16	445:23 446:10
325:1,12 354:4,17	245:17 247:7,14	449:1 450:12,23	448:20,24 453:19
363:5 378:13,22	247:21 249:13	452:11,19 453:23	460:6 461:3 462:3
458:2,7 459:7,15	255:24 256:10	455:7,21	opiates 37:15 38:1
460:2	257:6 261:14	omissions 273:5	38:13 394:5
ohio's 8:7 264:1	262:24 263:19	326:22	454:14
269:18	267:2 269:11	omitted 329:23	opinion 73:5,8,9
okay 16:19 18:2,7	271:20 272:16,21	once 36:19 158:2	173:8 369:7 453:4
18:23 19:5 23:24	273:14,22 274:5	404:8	opinions 33:10
25:11 34:24 36:12	275:2,4,9 279:1	one's 257:13	375:18
40:13 41:12 45:4	280:24 282:24	ones 22:18 26:8	opioid 34:19 37:10
49:5 55:2 58:8,9	283:1 286:8	27:12 38:14 42:22	37:21 38:23 39:12

[opioid - ordinances]

Page 52

41:22,22 42:18,25 43:8,13 44:11 45:6 47:12 56:13 70:1 79:20 83:5 84:15,19 86:24,25 94:5,18,24 98:11 99:15 102:15 144:13 154:22 158:16 161:15 164:10 171:8 172:21 173:6,8 175:15 178:3,22 184:7 196:1,17,24 197:19 198:4,14 202:1 206:14,21 211:9,15 213:5 214:11,20 215:14 215:15,18,21 217:1,17 218:18 219:3,11,13 220:9 223:3 228:17 230:11,14,15 231:5,15 238:3 239:9 240:25 241:4,17 243:2,18 248:3,5 249:2,9,15 251:12 253:8 255:13 256:2 257:8 258:24 259:5 261:3,18 262:10 283:17 287:17 289:14 293:15 304:2,9,19 304:22 308:2,5 316:6 328:7,14 329:3 330:5 331:17,25 332:11 332:13,22 333:3 333:15,22 334:3,5 334:6,14 351:16 355:7,11,23	368:20 369:10 371:25,25 377:13 377:16 379:17 383:4,10,24 384:4 384:13,21 385:3 390:1,4,17 392:15 392:24 394:2,6,24 395:5,8,11,14,15 396:11,14,15 398:17 402:23 403:3,18,20,24 405:5 406:2 408:4 410:3 414:11 415:23 418:25 419:5,12,21,25 421:18,25 422:13 422:18 424:6,10 425:3,11 428:24 429:4 430:16,20 430:23 445:6 446:4,20 448:20 452:25 opioids 34:4,9,18 35:8 36:3 38:3,13 39:15,18,21 40:9 40:23 41:1,16 43:4,6,11,14 44:7 53:19,20 54:7 55:4 56:6,19 57:2 57:9,10,12,16,19 59:12 60:8,21 71:20,22 72:3,11 73:14 74:9 76:2 76:22 77:12 78:2 78:11,15,17 79:6 79:16,17 80:12,18 80:19 81:9,10 82:16 83:14,18,20 84:1,6,7,12 87:7 93:22 95:21,22 96:3 98:18 99:3	106:13 109:7,8,15 111:16 112:25 114:2 115:9 119:5 122:6 123:2,22,25 124:8 125:24 126:4,23 138:2,14 138:15 157:22 158:17,18,20 161:8,19 162:12 171:1 180:15 184:2,20 185:3,11 185:15 189:2 200:20 207:14,17 220:1,10 221:1 230:21,24 241:8 245:25 246:5 248:14,20,24 249:1 260:2,14,15 261:22 263:4 273:3 283:18 288:8 289:15 295:5 305:2 306:12,19 315:8 326:20 330:2 334:8 335:9 337:7 337:12,14,20 338:17,20 339:14 343:1 346:20 350:13 351:2,18 353:13,17 354:6 355:3,22 356:23 357:10,15,19 358:2 359:5,9 360:5,13,20 361:21 364:5,18 365:22 369:18 370:4 373:17 374:9 382:15 390:22 391:11,23 392:3 394:1 399:9 402:3,15,20 404:1	406:7,16 410:16 412:18 413:8 423:10 445:14,17 445:19 447:13,21 450:4 453:13 opium 38:2,16 77:17 93:6,15 262:16 opportunities 210:3 447:22 opportunity 19:25 20:8 226:6 268:6 opposed 147:15 338:19 343:23 opposite 158:3 357:12 options 240:7 order 8:20,23 9:8 120:11 122:2 129:7,21 130:4,8 132:13,16,20,23 132:24,25,25 133:1,22 134:25 168:5 184:14 190:14,16 264:25 265:7,24 268:8 269:6 292:10 326:4 366:21 417:5,6,9,10 419:17 421:3 ordered 122:6 123:3 130:17 152:9 orders 120:14 122:9 123:8 127:23 133:5 168:6 416:20,21 416:25 417:2 ordinance 251:2 ordinances 364:14
---	--	--	--

organization 241:15 386:14 445:5,13 organizations 9:17 92:19 147:15 377:3 385:15,24 389:14 446:7 447:10 448:1 organize 244:17 organized 280:14 oriana 217:21 218:4 219:2 227:3 227:5 origin 158:18 original 96:19 97:13 188:12 275:25 285:13,23 306:24 423:12 originally 113:22 135:23 179:17 306:13 403:6 431:4 originated 98:19 origins 38:2 outcomes 391:17 outnumbered 174:7 outside 64:6 83:6 96:14,18 113:11 124:4 147:1,11,14 164:19 180:5 187:18 198:20 200:1 232:4 269:3 324:8 325:6,14,24 326:7 327:23 330:12 332:16 342:1 345:13 349:23,23 359:25 370:11 385:9 outweigh 40:1	oval 380:1,3 overall 126:18 139:5 436:13 overdose 9:12 34:22 45:3 84:19 86:11 161:6,12 175:1 193:21 199:7 203:12,16 203:20 208:20 233:14 235:2,3 236:8,10 241:7 266:11 272:8 337:7,15,21 338:17 398:18 overdosed 34:11 34:20 81:11 232:10 241:10 overdoses 80:16 81:6,9 94:10,18 203:6 204:1 207:3 211:10 214:21 231:22 235:16 262:18,20 335:8 337:14 overdosing 80:18 86:24 95:5,19,21 95:23 232:3 overlap 88:1 238:6 overprescribing 102:7 overstated 94:5 oversupply 260:24 overwhelmed 55:4 195:9,10 overwhelming 53:24 58:1 193:18 369:13 410:14 451:20 overwhelmingly 405:20,21	owned 252:24 owns 240:9 oxford 3:16 oxycodone 38:4,15 39:16 42:21 46:9 oxycontin 36:18 36:21 38:4,15 39:16 42:21 46:9 53:11 315:4 <p style="text-align: center;">p</p> p.m. 32:10 456:7,8 packet 299:23 page 10:2 37:9 48:24 50:3 53:4 61:25 62:8,13 64:11,18 68:19 118:21 120:8,9 123:16 125:22 126:12,13 128:24 129:2 136:18 190:23 220:19 237:25 238:24 243:9,14 256:1 270:2,3,22,23,24 272:25 274:2,7 280:21,22,23 282:25 283:2,3,8 284:9 287:6,7 288:2 293:11 299:21 300:13 310:20 311:16 314:24 315:1 317:1 326:15 329:9,11,13 331:10 335:10,14 335:15 339:7 340:7 347:25 366:22 377:23,23 379:4,5,21,23,24 379:25 386:16 387:2,3,20,21,24	388:23 389:23 427:13,20 428:4 428:11 460:13,15 462:7 463:3 pages 64:9,19 68:2 120:8 194:17 270:2 275:7 331:10 paid 176:8 207:17 216:7 226:1 232:5 236:17 247:23 393:15,16 pain 9:17 37:19 45:11 51:2 83:8 115:12,15 145:13 305:2,7 306:14,17 306:20 326:20 327:5,7 330:2 333:10 352:15 369:12 374:16,21 375:2,5,11,15 376:23 382:25 383:9,13,23 384:5 385:24 386:14 387:5,12,15,16 388:5,18 389:9 391:21 392:7,9,12 405:22 406:3 430:23 431:1,5,6 431:11 432:5 pants 159:1 paolino 61:25 67:15 68:12 71:6 82:22 166:16 453:25 454:1,11 454:12,23 paolino's 25:25 82:7 paper 139:9 193:17 361:4
--	---	--	--

paragraph 137:3 137:6 274:7 287:7 287:10,25 288:2 315:1 317:1 326:16 329:12,14 335:2,25 336:10 336:12	379:24 393:22 401:12 413:16 414:20 423:13 431:10 432:17 438:20 446:21 447:19 462:9	passive 361:5 patch 91:8 patches 90:18 patience 456:4 patient 97:6,13 115:10,15 130:19 158:9 184:6 194:9 269:12 275:12 301:17 305:11 316:7 317:12 318:20 319:1 321:15 329:1 331:25 357:9 374:22,24,25	paying 95:7 218:15 252:24,25 254:18 payment 325:12 payroll 26:20 pays 231:14 peak 69:25 70:2 peaked 373:21 peddle 179:24 penalties 157:4,10 penalty 21:2 pending 371:12,12 371:15 pennsylvania 3:17 people 24:13 26:10 27:11 39:19 43:4 44:6 47:11 49:17 54:12 64:14 64:22 75:23 76:1 76:7,8,17,21 77:3 77:11,25 78:9,13 79:3,4,15,19 80:11 80:18 81:11 83:10 83:13 84:2 85:5,8 85:14,25 86:2,17 86:23 93:18 95:2 95:4,7,16,18,20 96:1 97:4 99:14 99:21 101:10 103:20 104:7 106:24 107:5,15 109:5,14 110:14 112:1 116:2 129:10 138:4,8,21 139:9 140:17 141:4 143:1 153:19 157:21 173:15 174:17 175:10,16,20,21 175:22 176:19 177:12,19 180:15
parameters 291:24 292:1 318:12 321:3 paraphrase 287:13 paraphrasing 417:24 paren 387:7 parent 368:14,24 372:5,12 parenthetical 283:9 parents 194:3 242:14 352:12 parks 249:14 parse 57:13 parsed 87:9 part 42:25 70:12 72:15 90:5 94:13 109:11 121:9 127:18 129:6,20 130:4,7 132:13,16 133:21 143:20 164:8 167:17 176:16 180:18 196:1 205:8 209:2 217:24 232:12 235:24 247:16 248:18 249:23 250:13 286:8 293:2 315:15 325:19 329:11 330:15 334:24 369:1 377:17	partial 329:12,14 participated 150:15 215:12 337:4 374:23 375:10 376:8,9 436:11 participates 170:7 231:2,8,9 244:25 particular 45:21 53:21 65:4 100:3 105:17,20 115:10 115:15,22,23 127:15,22 132:15 132:23 151:12 201:13 202:9 218:1 260:16 349:16 368:22 409:15 438:9 454:24 455:1 particularly 236:11 parties 14:10 15:3 partner 111:10 parts 31:10 361:5 party 209:21 301:25 408:25 409:14 459:3 pass 97:1 121:11 177:10 250:21 397:12 passed 34:13,25 35:13 399:15 passing 399:4 passionately 412:8	patient's 109:21 patients 83:7 109:6,15 110:16 113:25 114:6,17 115:8 138:10,12 138:18 139:5 140:15 144:22 155:18 156:4 211:8 214:19 216:18,25 217:15 223:2 228:17 283:14 286:4 288:7 289:12 301:13 302:5,12 302:19 303:9 304:2,9 306:4,22 310:16 312:10 330:1 342:24 357:2 387:6,6,13 388:7,19 391:6 patrick 24:18 381:18 patrol 65:9 221:23 pay 95:3 217:25 226:22 228:12,13 230:4	

185:8,10,13,14 193:6 195:24 196:9,10 198:25 201:11,12,17 202:9 203:5,6 207:2,24 208:16 214:10 215:15 218:18 219:6 228:11,21 230:20 233:15 241:13 248:2 249:4,7 251:4,6 252:9,10 253:2 257:18,22 261:11,22 262:3 322:1 327:16 328:21 349:16 352:3,17,20 354:10 362:11 370:16 381:14 387:16 391:10 392:8,11,21 393:11 394:11,15 396:20,24 400:17 401:25 402:25 403:10 404:4,7,17 404:20,22 405:11 405:17,25 407:1,3 409:7,7,11 410:2 410:20 411:19,22 414:6,7,22 415:3 422:24 423:5 429:9,23 432:16 443:3 449:2 451:8 452:1,3,7 people's 174:24 199:21 396:3 perceive 47:10 perceived 47:2 perceiving 47:8 percent 73:13,23 74:16,16,17 75:25	76:1,6,7 77:1,2,4,5 77:11 83:18 93:21 247:12 251:25 252:5,14,16 400:16,17,21,24 401:20,20,24 402:12 403:25 405:20,23 406:2,5 406:11,12,13 407:17 408:3 409:25 411:2,4,5,6 412:10,16,21 413:19 414:10 percentage 79:17 80:10,16,21 81:19 81:21,25 83:10,13 84:1 96:5 147:9 160:25 161:14,17 170:18 185:5 200:20 218:20 219:10 402:13 410:2 percentages 82:3 146:14 218:25 perception 153:24 401:5 perch 26:4 percocet 36:19 38:4,15 39:16 42:20 57:17 percocets 46:9 perfectly 104:21 perform 200:1 performance 7:9 61:3,10 period 57:4 62:9 63:17 95:3,17 148:18 157:3 220:23,24 353:18 354:14 362:24	perk 95:2 permanent 224:18 224:20 person 76:15 99:6 104:12 105:17,20 105:24 106:2,5,19 106:20,22 108:3 117:12 158:5 159:17 161:7,15 211:21 217:23 227:10,10 230:8,8 231:11,11 248:8,8 260:19,20 267:25 272:7 295:4 304:18 305:6 312:20 321:19,22 321:25 332:21 334:20,22 337:24 337:25 391:7 403:16 405:2,8 406:15 436:3 439:8,21 person's 42:7 personal 25:5 33:9 33:10 34:2,15,15 36:11 194:1,3 212:13 242:10 406:21 409:12 410:1 415:4 432:1 personally 34:8 45:25 46:2 47:2 49:16 166:24 185:25 212:2,23 241:3 381:12 398:17 433:5 461:11 462:15 persons 62:16 perspective 82:15 82:21,25 109:21 121:15 141:14 363:10 447:5	454:15 pervasive 333:6 333:12 334:7 353:3 369:8 404:9 413:6,7 pesci 24:24 27:24 350:10 pharma 1:11 3:14 3:14 5:3,3 368:15 415:25 435:16 436:22 449:17,18 pharmaceutical 15:25 53:7 56:12 63:1 64:10,14,23 90:12 91:20 101:3 168:6 179:12 350:15 351:11 352:1,18 354:5 355:11 356:22 359:16 362:6 363:12,18 364:15 365:18 366:10 367:18 368:6 369:16 371:24 372:2,9 374:6 375:9,14 376:23 388:11 395:9 pharmaceuticals 3:3,13 4:12 5:3 50:6,21 51:21 62:22 65:22 66:15 96:10 121:20 390:15,17 415:25 428:3,8,14,17 pharmacies 51:21 53:17 65:25 66:10 66:16 118:25 119:7,10,13 120:3 120:13,19,25 121:5,9,14,19 122:3,4,7,8 123:1
--	--	---	--

[pharmacies - plaintiffs]

Page 56

123:7,21 124:11 125:23 126:10 127:15,23 128:1 134:21 139:25 140:9 168:6 171:24 384:24 395:1 pharmacist 97:6 163:14 pharmacists 66:8 66:21 71:4 99:9 107:19,23 141:1 143:3 162:5 164:21 pharmacy 8:9 26:11 53:9 54:6 66:6,8,21 101:14 105:2,8 113:23,24 113:24 116:1 123:24 124:1,7,13 124:23 126:4,22 133:1,5 134:17 162:22 163:2,12 163:18 172:22 264:5 269:21 276:8 320:22 416:14,18 417:7 417:15,22 philanthropic 446:6 philosophy 246:23 phone 16:10,19 125:12 182:11 194:21 370:16 455:16 460:3 phones 14:6 physical 196:8 physician 98:17 99:8 115:7 242:17 372:6 440:8	physician's 369:7 physicians 58:11 58:13,15 59:4,6,18 71:3 78:18 107:23 164:19,20 208:9 339:14 340:1 341:5,25 342:8 343:8 358:13 364:16 389:20 391:8,23,25 392:2 428:21,23 429:2 pick 14:4 45:14 426:17 piece 58:22 134:6 134:6 135:4 334:24 423:16,21 pieces 59:9 440:10 pill 44:9 46:7 98:14 108:14,17 108:21,22 113:13 146:2 262:3 337:23 338:9 394:20 430:15,19 pills 43:16,21 45:12,16,19 46:16 52:11 53:25 54:10 54:13 55:2 70:1 72:22 74:10 91:9 94:19 96:17,25 101:11 102:21 103:13,20,21 104:3,3,6,13,17,18 104:20,21,25 105:8,11,13,15 106:5,12,14,19,22 107:21 108:2 111:20,22 134:13 134:14,17 146:11 146:15 147:20 158:1 159:12 161:3 172:13,14	260:20,25 262:5 262:16 321:21 334:12,18 338:4 350:20 352:2 358:9,14,15,17,23 368:10 369:11 372:18 373:5,12 384:24 392:6,20 393:23 394:13,15 394:19 395:5 405:22 406:3 408:4 438:24 439:7,21 pinpoint 437:4 pittsburgh 3:17 place 14:7 99:19 135:13,14 155:17 155:17 162:6 178:23 212:8 224:17 241:13 249:11 260:5 306:23 434:20 435:14 440:11 448:10 454:14 458:20 placed 120:13 122:9 123:8 133:1 168:6 259:23 260:6 278:21 290:17 placement 238:16 259:19,22 260:8 402:14 places 66:16 151:20 217:20 263:18 451:13 plague 42:13 73:11 plain 277:9 plaintiff 8:1 120:12 129:3	136:11 188:25 250:6 257:7 270:11 284:2 308:22 346:22 plaintiff's 7:18,22 117:25 118:7 128:7,13 136:4 197:17 246:3 250:4 256:2 268:7 272:22 293:12 312:3 327:4 339:18 455:20 plaintiffs 8:11 9:2 185:22 205:15 264:11 265:14 267:24 268:1 270:11 273:2 274:9,11 275:17 275:22 276:15 277:3,8,22 278:22 278:24 279:4,22 281:22 282:9 283:3 284:3 285:9 287:11 288:4 289:12,20 292:1 293:25 294:3 295:24 296:16,18 297:8 299:5 300:2 300:21 301:7,16 302:2,9,23,24 306:3,10 307:3,14 309:16,18 314:20 315:3,18 316:10 317:11,20 319:9 322:12 323:14,20 324:1 325:5,22 326:14,19 329:21 330:9 340:4 343:5 344:6 345:5 346:16,18,18,21 433:19,21 434:24
---	---	---	--

[plaintiffs's - pre]

Page 57

plaintiffs's 331:6 plan 446:19,21 plant 251:19 platform 176:9 193:10 213:9 play 185:8 309:6 394:1,5 429:10 played 308:19,19 310:10 312:8 378:2 429:2,7,12 430:12,19 452:5 playing 35:9 390:5 plays 394:7 plaza 2:14 pleading 299:11 299:13 pleadings 28:15 pleas 21:3 204:14 204:16 246:13,25 247:12 352:12 pleasant 2:7 please 14:3,6 17:9 18:17 25:14 29:7 106:18 133:11 194:21 206:16 248:22 274:2 280:4 282:3 290:18 291:20 309:3 314:15,24 324:18 326:15 329:10 331:2 348:25 366:25 371:4 378:4 379:20 419:1 430:2 454:10 460:11,11 plenty 229:4 408:20 pllc 4:21 plus 30:23 321:25 412:24	pocket 43:22 point 18:25 47:16 98:11 140:11 191:8 196:16 202:4 216:20 220:17 222:24 228:19 230:3 233:9 235:6 237:25 238:18,22 242:1,11 243:9,11 243:13,14 244:16 245:22 246:13 259:10,15 271:20 289:5 291:18 311:11 312:19 322:19 345:13 351:18 353:21 362:8 365:13 368:1 375:17 376:6 390:18,21 393:5 430:4,22 439:7 444:14 446:10 453:22 pointed 54:22 194:6 352:17 409:17 pointing 380:3 412:2 points 237:14 447:16 police 24:19 52:15 52:22 63:22,23 65:13,15 103:16 103:18 107:15 150:5 165:15,21 179:22 203:23 205:7 207:11 208:19 209:1,2,4 212:10 233:10,11 234:18,19,23,25 235:7,25 242:23	242:25 243:4 244:1,12 438:11 438:12 policies 164:25 177:24 178:16 179:7 181:5,8 policing 203:24 208:21 policy 165:3,11 214:9 246:18 247:25 249:10 politics 354:17 pollard 26:2,16 polster 1:9 populate 66:1 population 42:15 44:24 66:2 94:23 99:12,17 153:19 195:23,24 204:21 250:4 257:19,22 262:15 401:2,19 402:20 404:11 portage 1:22 portion 78:16 79:7 195:21 196:19 197:2 401:17 420:9 portions 29:13 pose 82:16 posed 295:5 424:14 position 17:16 20:4 48:15,20 72:13 117:13 213:10,12,17,19 214:3 289:8 296:10 312:3 328:22 360:9 420:18 424:7 430:5 452:20	positions 252:14 positive 164:10 positively 34:8 possess 41:2,7 possession 21:7 46:8 63:15 159:20 246:17 possessions 57:16 221:2 possible 77:10 119:4 232:18 333:15 possibly 406:5 post 36:7,15,24 98:16 102:15 167:12 potent 263:14 potential 305:5,5 355:22 395:10 potentially 7:15 88:14 130:3 296:4 314:13 pounding 125:1 poverty 228:1 power 65:10 99:4 101:16,20 102:2 103:23 107:16 443:8 pplpc01900139... 9:18 385:25 practice 214:10 252:22 310:22 364:20 practices 310:14 374:13 389:20 practitioner 184:16 practitioners 51:22 184:11 pre 103:3
--	---	---	--

precise 141:25	prescribed 39:19	73:14 76:2,22	405:22 406:7,16
predict 210:21	40:10,16 53:20	77:12 78:2,11,15	410:3 412:18
pregnant 231:6	54:21 57:12 79:18	78:17 79:5,16	414:10 423:7,12
preparation 28:9	79:20 83:5 98:12	80:11,12,18,19	450:3 454:9,16,22
30:22 31:9 32:25	103:3 104:8	82:16 84:7 90:11	460:6 461:3 462:3
33:15 73:2 153:3	105:10,21 129:5	91:4 96:3,9,14	prescriptions
268:10 271:21	129:19 130:22	98:10 99:7 100:6	46:15 94:24
276:10 281:12	134:15,16 138:3,4	105:4 111:16	102:24 104:7
286:2,9,15,16	138:16 139:5	114:11,21 115:4	107:8 109:6,8,15
293:2 295:9,12	146:12,16 161:8	119:4,5 122:5	110:15,17,22
296:16 297:12	161:23,24 162:12	123:2 130:15	113:17 126:6,24
298:21 300:1	179:15 180:22	133:21 134:18	130:7,13,18
316:21 330:25	242:16 286:18,19	144:13 147:24	131:14 132:12,15
337:5,19 349:23	287:18 288:7	158:17 161:16,19	132:22 133:6,7,13
349:24 350:6	289:15 315:4	164:12 184:2,7,15	133:14 134:22
367:8 379:11	317:4 328:9	189:2 242:16	135:8,17 137:24
380:13 381:14	334:20 339:14	260:15 263:4	138:25 139:15,22
400:8 427:24	341:6 358:9,10,11	272:7 274:12	140:1 144:10
439:15	370:2	278:4,8 286:17	147:6 162:10,11
prepare 23:6 24:5	prescriber 124:24	292:4,18 304:19	184:12 273:3,9
30:19 268:17	prescribers 137:9	304:22 308:2,4,5	279:4,5,14 284:3
276:21 319:18	137:14 150:16	315:19 317:22,23	284:16,21 285:11
347:2 349:11	310:8 340:3,12,19	318:13 320:5	285:12,19,24
356:10 367:10	prescribing 108:2	321:13,14,23	286:12,13 287:15
399:18,23	108:2,6,9 112:6,8	328:12 332:12,13	289:11,21 291:3
prepared 25:6	130:5 138:1 180:5	332:13 335:9	291:25 292:13,21
267:12 269:1	310:14 341:1	337:7,12,14,20	293:4,11 294:2,7
286:20 346:24	369:20 374:8,12	338:4,9,16,17,19	297:8 299:6
349:5 367:1,5	374:13 377:8,15	339:14 340:11	300:20 301:1,9
432:13	389:17,20 393:25	346:20 350:13	302:4,11 303:3,9
preparing 118:18	445:6	351:2,17 353:12	303:15,22 304:2,9
128:21 297:16	prescription 1:6	353:17 354:6	305:2,13,19
375:20 379:13	9:13 14:20 34:4,9	355:3,22 357:10	307:16 308:14,15
399:18 400:1,1	34:18 36:2 39:11	358:2 359:4,9,10	308:20,23 309:8
434:20 452:16	39:12,15,21 40:9	360:4,13,20	309:15,19 310:1,8
pres 162:12	45:16 51:17,20	361:21 364:5,18	310:25 311:1
prescrib 108:1	56:6,13,19 57:1,9	365:22 369:18,19	312:3,15 313:11
prescribe 40:23	57:19 59:12 60:8	370:4 373:16	315:2,12,13,14,17
55:2 97:15 115:9	60:21 65:22 66:15	374:8 378:14,23	316:3 317:2,4,19
180:14 310:11	69:17 70:8,14	382:14 399:9	317:21,22 319:13
	71:22 72:2,11	403:18,20 405:4	320:1,13,14,18

322:13 323:17 324:3,3 325:4,13 326:20 327:1,4,6 327:17,18 328:15 330:11 333:3 340:3,14 341:4,10 341:18,21 342:12 343:21 344:5,12 345:4 416:4 presence 43:16 196:8 369:13 458:15 present 5:10 15:1 208:22 209:7 222:2 presentation 373:25 377:13 presentations 74:5 presented 390:1 410:5,7 414:21 435:15 438:21 presenting 245:20 372:24 preserved 232:19 press 185:25 187:6 pressed 431:6 pressure 142:23 447:16 pretty 30:4 36:25 80:22,24 92:25 93:1 154:24 159:23 210:12 211:3 223:21 235:5 252:5 455:4 prevalence 56:13 56:17 72:10 184:23 211:14 prevalent 94:4,5 107:22 232:3 262:9	prevent 99:4,25 100:2 101:16,20 102:3 103:24 157:12 prevented 104:1 prevention 60:17 99:18 101:18 200:11 202:17 previously 21:24 24:10 26:15 27:13 46:25 47:13,15 161:8,15 202:23 203:7 224:17 232:16 247:17 250:25 252:23 253:1 274:12 284:22 381:24 407:23 preyed 392:21 prided 380:24 primarily 90:21 160:7 227:15 233:3 428:14 primary 94:1 98:17 150:21 255:7 420:17 print 271:22 printed 283:25 prior 46:7 71:1 153:21 181:17 196:5 222:22 225:18 259:20 351:18 355:3 356:15,23 368:1 373:17 374:19 396:10 442:2 priorities 224:14 224:16 354:21 447:7,8 priority 174:19 224:25 225:1	257:3 259:23 privacy 36:11 private 14:5 94:8 228:13 privilege 299:3 privileged 297:25 298:4,19 379:12 proactively 203:24 208:21 probably 22:20 28:16 32:16,18 57:14 102:8 131:17 138:5 151:10 154:12 172:9 173:16 180:1 195:3 201:15 206:6 219:20 237:16 245:10 249:11 281:7 315:6 400:3 408:16 442:15 450:20 probation 159:10 164:6,8,14 221:5 227:16,20 246:24 problem 18:15 39:5 46:1 47:2,5,6 71:20,25 72:16 84:8 89:3,10,18 93:9,12,13,20 94:14 171:8 172:22,23 173:6,8 173:11 175:6 193:7,9 206:14,21 224:7 249:2 263:10,13 306:21 332:24,25 341:15 383:13,15 384:7 393:3 395:15 419:11 423:5	problems 59:11 91:13 93:17 248:3 374:3 396:24 procedure 17:1 457:7 461:5 462:5 procedures 177:25 178:17 179:8 306:15 308:11 proceed 16:23 proceedings 19:12 21:13 process 40:4,5 111:7 124:6 159:6 217:25 234:10,14 234:14 272:11 276:1 334:25 359:12 375:10 390:25 414:20 425:18 433:20 434:3 452:14 procured 333:7 produce 37:19 41:2,6,15,18 85:13 288:5 319:5 produced 8:19,22 9:7 29:7 65:17 66:24 74:1 264:25 265:7,24 285:13 286:11,12 289:9 305:17 316:14 322:5 330:15 414:20 439:17 produces 41:13 product 298:3,4 298:19 299:3 production 67:16 69:1 460:15,17,22 products 198:9 315:13,20 316:3,9 316:18,23 359:17
--	--	--	---

[professional - public]

Page 60

professional 34:1 113:3	416:3 445:7	380:25 381:1	308:24 312:9
professionals 112:2 184:10	promotional 353:22 355:10	390:11 408:5,13	315:3 318:11
252:20 414:23	362:7,20 363:17	413:17 437:9,11	319:9 323:16,21
449:6,7 451:16	365:18	437:16 438:5,6,6	323:23 324:1,4,5,9
program 159:14	promotions 365:7	443:4	324:15,19 325:5
215:19,20 219:17	pronouncing 144:6	prosecutor's 20:17	325:22 326:3
220:3 230:13	pronunciations 315:7	20:20,22 43:20	327:2 329:25
231:2,6 445:4,11	proof 122:16	107:12 163:13	341:24 342:3,13
programming 159:13 230:9	proper 231:21	204:15 256:23	343:21 345:4
programs 198:15	properly 115:2	441:23	357:3 370:4
219:13,17,22,25	257:7 292:9	prosecutors 60:3	389:18 411:23
227:11,14,24	417:23	95:9 142:17 178:1	provider 227:8
230:10,15,23	property 250:5	221:4	275:12 278:14
245:21 447:3	proposition 208:4	prospects 20:7	providers 195:5
progresses 407:3	prosecute 20:25	protected 8:18,21	218:8 228:14
progressive 77:15	21:4 135:22	9:6,9 264:24	230:7,9 240:12
404:5,14	prosecuted 21:11	265:6,23 266:5	388:18 410:8
project 258:18	28:7 53:16 106:17	protections 180:8	449:5,6,8
projects 198:2	106:20,24 108:11	protective 8:19,22	provides 204:17
prominently 137:23 143:14	110:15,20 112:23	9:7 264:25 265:7	204:18
promote 198:13	113:5,17,22	265:24	providing 86:6
211:20 365:21	115:19 135:25	provide 52:23	211:7 214:18
promoted 158:2	140:1,2,3 143:18	54:25 65:7 117:14	216:22 217:14
promoting 198:7	163:15 339:17,23	122:18 216:17	223:1 228:16
361:7	341:5	226:23 231:4	238:1 281:21
promotion 140:22	prosecuting 60:3	239:21 271:14	282:20 320:7
188:25 189:10	157:5 438:8	275:18,23 276:14	323:12 397:22
346:19 350:12	prosecutions 143:21	276:15 277:20	proximity 124:9
351:2,17 352:5,7	prosecutor 20:12	278:5,16 302:2,9	124:21,23 169:24
352:22,25 353:2	20:15,23 21:15	323:14,25 405:19	psychological 218:10
353:12,17 354:5	46:23 47:7 50:1	422:8	public 4:15 17:17
355:1,21 356:23	55:1 89:21 107:14	provided 16:25	21:22 24:23 25:1
357:19 358:2,12	116:7 122:11	31:14 64:19 74:1	25:3 26:19 27:24
359:16 360:4,25	142:19 152:24	100:4 187:24	30:24 44:18 47:10
361:2,6,11 364:11	167:2,12 242:7	217:5 218:11	57:24 58:5,10
364:17 366:10	355:24 356:1	227:2 271:8,9,10	59:13,21 60:4,11
367:18 368:6,23	369:9 372:17,21	272:12 273:9	73:1,9 74:2 76:4
		274:12 279:6	83:3 86:7 94:8
		281:23 283:18,23	141:2 142:24
		287:15 293:5	146:18 162:25
		298:1,1 302:4,11	

[public - quick]

Page 61

163:7,9 169:5,7 172:1,5 186:23 197:17,19,21,22 197:23 198:5,21 201:24 202:5 211:22,23 212:9 212:11,12 213:22 213:23,25 214:5,7 215:3 217:9 222:2 229:25 230:3,24 231:1,7,14 243:17 249:14 296:11 320:3 326:10 350:9 359:2 382:8 382:12,13 406:25 407:7,25 410:19 410:24 439:19 440:3,6 444:21 448:5 449:11 458:7 459:14 461:10,18 462:15 462:23 463:23 publicly 142:23 382:5 386:11 published 407:22 409:18 pull 23:22 190:4 190:21 317:21 439:13 440:13 441:16 442:6 pulled 439:11 punishment 248:10 purchase 239:18 purchased 86:25 222:20 purdue 1:11 purportedly 337:6 purpose 158:10 200:13 208:23 213:1,3	purposes 22:9 40:17 48:4 61:12 67:22 88:16 118:12 128:17 135:12 136:15 143:5 182:5 264:7 264:19 265:2,9,19 266:1,6,12 295:16 297:15 298:12 309:16 350:2 378:17,21 386:2,7 purse 158:25 pursuant 8:16 264:17 268:7 270:16 271:7,8 457:3,6 pursue 178:2 450:2 pursuing 83:11 push 156:25 pushed 198:23,24 431:12 put 25:7 69:12 73:20 110:12 114:4 115:6 117:12,15 135:3 135:13,14 140:14 148:12 156:20 172:13 186:20,22 187:4 192:17 193:17 194:21 195:7 199:14,17 215:23 269:16 350:18 352:2 362:14 372:18,19 393:18 404:8 420:18,22 427:6 429:17 432:24 433:12 436:18 441:19 443:25 452:12	puts 162:1 putting 59:9 258:13 360:17 q qrt 209:2 233:11 234:11 qualifications 208:13 qualified 33:19 71:17 82:22 398:1 458:8 quantico 151:7 quantifiable 254:3 quantified 87:13 quantify 87:5 208:24 209:14 259:17 quarter 52:16 186:10 372:19 438:22,23 quarterly 436:9 436:14 question 18:10,21 24:3,4 29:14 36:10 55:10 62:15 62:16,23 63:7,9 64:9,13 68:20,22 70:5,9,10 72:14 79:14 110:3,9,11 111:3 116:9 117:17 120:1 122:20 124:11 126:2,21 127:19 131:9,18,24 132:6 136:17,23 141:10 142:1 148:10 154:17 181:19 186:19 189:7 192:5 202:7 219:20 236:5 254:12 259:1	261:14,15 262:25 282:2 296:23 309:14 320:25 322:20 323:1,6,24 324:18 333:18 342:22 344:3 345:1,15,21 350:22,25 352:22 360:16,23 361:14 371:5,13,15 383:17 390:24 394:8 401:13 402:6 404:20,21 412:22 413:21 414:3 420:1,4,10 421:19 422:7 424:22 426:24 427:1 449:21 questioning 225:21 414:13 questionnaire 71:18 questions 18:13,16 18:25 67:25 109:12 131:3 140:11 151:21 166:6,8 206:6 229:13 237:19,22 267:1 311:9 343:13 348:9 361:9 374:25 397:11,13,22 398:12 414:15 415:14 418:15 422:2,3 424:14 429:22 430:1,14 434:14 435:13 455:15,17,24 quibbling 40:20 quick 199:14,16 208:15 209:13
---	---	--	---

[quick - really]

Page 62

222:4 quickly 35:14 190:11 232:18 241:11 quite 57:25 76:16 113:25 188:15 232:24 328:6 351:13 352:11 363:21 392:19 426:15 quota 433:20 434:3 quotas 433:22 434:9,18 435:3,11 quote 51:15 52:14 52:19 53:6,12 254:24 403:9,11 415:25 416:1 428:9 433:18 quoted 185:25	ratio 65:20,24 rawlings 134:7 135:3 268:22 272:12,18,20 276:2,5,14,25 277:4,8,15,19 286:23 291:10 293:20 296:17,19 296:22 301:23 302:2,9,10,15,21 302:22,23 303:8 303:11,14,20,25 312:16 317:14,21 318:5,11,25 319:4 319:10 320:11 323:12,15,25 324:5,19,25 325:21,23 326:1,3 326:5 328:25 329:7 332:2,4 340:13 rayford 5:6 125:14,15 reach 58:11 97:2 116:11 310:7,16 354:10 364:8 365:1,16,19,24 381:11 395:25 443:3 444:9 reached 70:2 87:9 170:21 171:5,10 172:19 193:5 363:12,13 380:23 381:9 reaches 169:16 reaching 444:15 read 24:9 25:2,8 25:16,25 26:1,4,9 27:2,5 29:12,17 31:2,5,6,8 32:22 49:24 52:3 66:18	73:2,7,17,25 74:6 82:6,11 119:19 145:6 148:11 167:15 195:23 267:19 274:15 283:20 284:13 285:3 287:9,14 295:13,15 300:17 317:9 323:19 326:24 330:7 331:22 336:5,8 339:11 349:7 369:25 370:1 371:5,7 375:8,8,13 375:22,23 376:16 376:22 377:19,23 380:11 381:24 388:8 389:13 415:5 461:5,6,12 462:5,6,17 reader 32:9 readily 71:1 74:11 76:3 104:1 260:21 333:7 384:8 reading 28:20 29:20,25 31:10,25 32:8,20 68:17 115:21 139:8 288:11 347:4,7,9 347:11,12,18 348:5 377:6 388:22 389:7 392:1 400:3 447:25 460:19 reads 283:13 288:2 307:11 317:2 326:17 329:20 331:16 335:5 388:5 ready 214:14 346:8	real 46:3 157:25 228:5 368:17 374:22 391:17 404:6 451:13,19 realistically 450:21 realization 355:15 realizations 367:24 realize 86:24 245:10 295:7 really 20:6,8 25:6 30:3,21 32:7,19,19 37:22 42:12 43:15 43:17 44:14,25 46:19 54:9 55:3 58:4,7,24 59:25 60:6 72:9 87:24 101:7 111:19 113:22 114:5 140:17,21 141:2 148:24 153:23,25 154:5,17 155:1 157:9 165:18 167:18 186:12 187:12,17 192:22 196:19,25 198:6 198:13,14 214:6 216:15 221:8,9,13 221:25 222:1 235:8 239:21 240:8 248:4 253:15 256:20 292:5 306:21 311:8,9 340:23 351:12 361:23 362:3 374:1,13 378:8 380:19 417:4 423:16 435:7 440:23 443:6 446:12,25
r			
r 145:9 398:25 ra 333:17 rainy 215:2 raiola 4:7 16:6,6 raise 454:14 raised 358:3 randy 5:11 14:11 rank 48:17 rape 203:13 rapid 42:13 rare 330:1 rarely 187:8 rat 114:1 ratchet 44:2 rate 175:23 251:22 252:6,15,16,18 352:3 rates 193:21 207:18 258:11 261:10 400:23			

[really - regarding]

Page 63

447:4 451:20 realtime 370:17 reason 20:2 50:19 52:25 54:16 56:9 63:7,9 65:19,23 69:23 78:20 79:9 98:15 121:18 187:3 213:7 224:13 248:13 284:12 315:23 321:24 460:14 462:8 463:3 reasonable 306:23 reasons 127:9,14 127:22 199:9 210:13 327:19 354:12 rebuild 194:12 recall 46:22,23 58:23 74:3,21 89:23 91:6 98:24 98:24 115:20 116:6,8 137:25 139:13,19 142:17 145:24 153:5 155:19 163:14,15 163:17 210:11,14 216:6 218:22,24 243:3 279:25 299:14 356:5,20 356:25 357:7,17 366:11 368:13 372:11 373:1,25 377:6,11,17 379:19 386:22 400:15,21,21,22 401:17 402:4,11 402:12 414:5 435:21 451:13 454:4,23,25	receipt 460:18 receipts 223:20 receive 74:9 168:4 168:8,20 218:18 293:1 361:20 received 129:23 209:21 210:18 233:15 234:4,7 272:14 278:20 279:13,16,22 291:4 293:8 312:20 332:12 receives 233:10 255:12 receiving 218:14 284:20 332:23 receptors 37:18 74:8 recess 67:10 125:6 181:25 237:4 263:22 313:5 366:4 370:22 397:6 455:11 recipient 30:25 317:23 recognize 118:20 135:21 137:3 280:23 300:9 378:21 379:7 386:10 recognizes 155:4 recognizing 365:17 recollection 33:9 188:1 287:8 288:15 431:16 recommendation 388:17 389:9 recommendations 9:15 377:25 378:16	recommended 96:15 record 14:2,10 23:23 45:20 46:8 67:8,11 88:4 125:3,4,7 153:22 181:23 182:8,19 183:22 206:2 237:2,5,9 255:16 263:17,20 266:15 266:23 267:20 279:11 287:14 289:4 291:3 313:3 313:6 336:8 349:8 366:2,5,17 370:19 370:20,23 371:7 382:8,12,13 397:4 397:7 444:21 452:19 453:14 455:9,12 462:9 recording 14:9 139:17 records 277:20 recover 193:1 431:22 recovering 215:13 215:21 239:9 recovery 44:17 117:13 206:9 220:3,5,8,10 233:12 234:9,11 234:16 405:18 red 328:22 358:3 396:18 redefinition 274:20 reduced 458:14 reduction 202:1 202:19,25 257:21 452:1,8	refer 51:10 55:17 156:5 180:13 291:17 416:13 reference 283:9 362:23 409:13 460:7 461:2 462:2 referenced 336:18 377:20,21 458:13 458:18 461:11 462:15 references 41:21 338:15 referrals 227:22 referred 85:20 98:2 108:21 221:20 246:14 249:20 281:10 303:16 referring 27:9 124:14 280:21 300:24 349:1 362:25 372:15 379:1 417:1 refers 137:9 231:25 reflected 63:25 195:3 337:9 reflective 63:14 102:17 337:12 reflects 76:5,6 refocus 201:13 reformulated 315:4,19 316:3,9 316:18 refresh 30:16 287:8 288:14 refusing 425:7 426:10 427:1 regal 17:10 regarding 21:21 24:11,14 203:25
---	--	--	--

[regarding - representative]

Page 64

300:1 353:10 356:14 357:9 359:15 360:20 361:14 367:8 370:5 373:16 386:23 390:15 447:19 457:2,11 regular 394:18 regularly 151:8 regulate 116:22 117:6 regulated 40:6 251:2 252:21 359:5 360:5 364:20 regulates 360:7 regulations 44:2 364:6,21 rehabilitate 155:5 216:8 rehabilitation 238:2 reimbursed 220:6 228:19 229:6 325:5 reimbursement 228:7 229:9,10 365:12 reiterate 273:15 reject 396:4 rejected 325:12 relate 67:25 136:17 170:19 256:4 259:4 related 84:14 178:3,22 211:9 214:11,20 217:1 217:17 223:3 228:17 231:15 243:18 281:21 297:7 353:12	355:2,10 357:15 366:10 375:1 397:14,18 435:11 relates 1:10 96:9 relating 56:5,18 57:1 59:11,13 66:14 346:21 445:14 relationship 386:20 388:11 relative 65:20 104:17,20,20 105:14,16 106:12 106:16 329:21 459:2 release 7:14 88:10 88:13 392:5 released 121:2 152:9 381:7 relevant 120:14 283:15 reliance 273:4 326:22 342:13 343:1 relied 28:9 140:15 298:12 342:23 391:5,6 408:21 423:8,8 relief 392:7 relieve 37:19 relocate 193:6 251:19 reluctance 277:12 reluctant 159:23 rely 286:1 relying 334:21 393:24 remained 316:12 remember 26:8 28:20,22 29:25 30:6,15 46:21	75:15 83:18 139:8 150:3 186:4,5 299:14,20 357:8 357:11 368:9,15 372:20 373:3,20 373:22 377:12 392:1 420:24 435:17 436:2 437:10 439:14 454:18 remembered 74:6 remind 29:16 reminded 153:9 372:22 remotely 15:2 removed 228:25 rendon 4:14 16:12 16:15,16 renewal 223:15,22 223:23 renewed 9:3 265:15 reorganizing 441:25 rep 424:23 repair 257:2 repeat 163:21 304:7 repeating 243:19 repeats 273:1 repetitive 414:13 rephrase 110:10 311:15 383:5 replacement 257:1 257:2 report 7:10 9:14 26:24 54:2,3 55:19 61:3,10 65:4,17 66:18,23 73:18 76:14 77:4 116:15 122:1	148:22 167:11 207:10 242:23,25 243:4 293:20 336:25 354:9,16 354:22 355:18 356:15 362:19 363:7 377:20 378:8,15,22,22,25 380:19 383:21 395:7,9 442:18,23 442:25 443:7,17 443:22,25 444:5 444:15,17 450:1 reported 115:12 162:17 371:22 reporter 6:15 16:21 47:20 61:1 67:14 88:9 117:23 128:5 182:16 461:7 reporter's 6:12 458:1 reporting 62:9 116:18 124:5,10 139:17 153:11 162:16 167:17 193:21 364:11 372:5 reports 63:3 166:25 168:5 319:5 442:1 represent 15:4 266:23 278:18 291:2 416:8 representation 122:8 representations 415:2 representative 33:19 174:15 186:25 226:8
--	--	--	---

[representative - result]

Page 65

343:15 403:15 406:22 411:18 413:18 419:2,18 420:2,8 421:10 422:9 423:24 426:9 433:17 representatives 206:3,7 309:24 342:11,14 354:15 365:8 449:9 represented 174:25 274:18 398:11 416:8 449:12,12 representing 14:12 16:21 168:11 represents 33:8 reps 101:2 111:5 312:23 341:13 361:6 republican 174:8 174:10 354:18,19 republicans 442:21 repugnant 395:21 reputation 165:19 request 172:4 196:23 272:3 275:11 286:20 322:3 328:18 365:3,20 396:21 397:17 462:9,11 requested 271:13 276:3 293:19 303:3 457:1,6,10 requests 131:7,15 224:21 273:1 require 127:4 164:25 220:7 233:6	required 143:6,8,9 164:9 190:16 234:2 236:16 246:23 268:2 306:3 460:25 requirement 162:4 requirements 124:10 210:11 220:5 requires 165:4 180:1,3 reread 49:18 research 29:21,24 30:6 55:13 73:16 75:6,9,19,22 447:20 reserve 215:2 resided 440:18 residential 218:11 residents 81:17 105:9 232:1 351:24 358:22 resolution 173:20 173:25 174:24 177:8 resort 216:14 resorting 46:14 54:9,12 resources 168:25 169:11 195:6 198:3 199:14 202:9 212:13 216:1 221:20 222:16 414:24 432:9 447:1,2 451:9 respect 179:21 267:23 309:15 323:16 346:20 359:15 367:11	409:24 430:22 453:4,8,15 respond 173:19 175:8 203:11 209:5,6 232:17 233:13 236:19 252:4 268:25 272:18 277:5 286:20 292:9 345:5,25 responded 131:14 283:4 287:11 370:10 responder 195:14 responders 195:5 231:21 236:23 responding 140:16 177:14 199:6 208:20 236:16 256:13 309:17 348:9 responds 161:5 response 9:2 22:25 120:5 121:23 125:18 132:2 144:4 145:1 159:2 173:9,13,18 174:16 175:9 182:13 191:8 194:16 199:15,16 208:15 209:13 222:3,4 224:21 232:12 233:11 237:14 240:5 254:14 265:14 272:22,23 275:18 278:24 282:9,21 284:17 289:9 291:5 305:18 310:25 313:11 315:18 316:14	324:5 326:14 327:3 328:18 331:16 339:8,9,17 340:2,4 343:6 346:23 349:12 361:17 433:21 434:8,24 435:2,5,9 446:20 449:20 responses 7:19,23 8:2,7,14 31:14 117:25 118:8 128:7,14 136:5,12 136:25 264:1,14 268:7 269:3,19 270:14 271:7,9 273:23 274:2 281:22 314:20 331:6 431:20 responsibilities 94:1 responsibility 100:21 responsible 340:25 responsive 343:22 344:6 345:1 rest 83:22 103:12 280:25 restate 192:5 restrict 177:25 178:19 restricting 181:9 restrictions 364:14 result 78:5 246:20 253:8 274:13 304:24 305:11 308:16,25 309:20 311:2 312:4,16 320:4 333:4 335:8 341:23 354:1
--	---	--	---

[result - root]

Page 66

375:19 376:5 402:23 resulted 305:24 results 58:17 85:14 resurgence 84:13 resuscitate 232:13 retail 8:9 264:5 269:21 416:14,18 417:15,22 retained 6:15 retired 453:22 return 313:13 returned 338:3 460:18 revenue 195:22 199:25 200:2 250:2 254:2,6,14 254:15,17,17 255:10 revenues 255:11 review 268:7,24 269:5 271:21,23 276:20,23,25 281:11 297:3,14 299:1 329:16,20 330:10 344:16 366:25 457:2,6 460:12 461:1 462:1 reviewed 24:11 28:11 31:13,17,17 32:22 39:24 48:10 96:1 118:18 128:20 148:23 191:13 192:4 273:21,22 275:5 284:10 292:24 293:18 297:1,4 298:12 299:12,13 300:2,6,8,11,13	316:20 319:25 328:1 330:19 339:9 342:6 353:5 356:17 367:4 373:20 400:8 407:19 428:1 431:9,10 436:10 439:16 452:16 reviewing 319:17 345:23 373:21 400:4 417:23 revised 21:11 267:22 272:23 288:5 291:5 revisionist 34:11 rewind 288:25 rewrite 433:14 rewritten 7:20 118:2,10 267:17 rewrote 423:22 429:18 430:6 ri 387:22 388:1,25 ri.1.2.8. 387:7 388:1 rice 2:4 15:6,9,13 15:16 24:7 rich 74:2 439:17 440:6 right 17:20 20:12 20:17,18 23:12,20 28:5 42:19 50:24 57:22,23 75:5,6 76:18 77:9 83:1 90:7 97:21 99:3 103:16,17 104:24 105:3,7 106:4,25 109:13 111:15 114:16 120:7 134:18 140:24 144:2,6 168:21 176:6 180:16	185:17 188:21 190:4,15 194:14 197:11 201:15 202:6 208:6 209:16 210:25 216:24 217:16 221:2,15 222:8 231:18,19 235:17 238:19,25 239:17 244:19 246:2 247:9 251:23,24 258:22 260:24 269:9,14 273:24 277:23 283:8 285:5,6,15 286:14 287:19 288:24,24 293:16,25 299:18 299:19 300:23 301:10,14 305:8,9 307:5 309:9 311:19,20,24 312:25 313:19 314:2,13 317:25 318:8,23,24 321:17 325:1 329:15 330:25 331:7 333:20 334:16 339:19,24 339:25 342:10 346:3,14 351:19 352:23 353:7,14 355:4,12 356:18 359:6,11 363:25 367:19 368:23 371:11,14,16,16 373:7,13 380:4,21 382:15,18 385:4 385:16 390:12 394:14 395:16 397:1 405:8 407:22 414:12	416:1 418:20 436:1,17 441:2 453:24 455:8 rights 36:11 ripple 355:14 rise 223:20 risk 83:4 329:24 329:25 330:4 391:24 395:4 risks 40:1 141:4 295:4 rite 3:8 16:2 124:15,21 398:11 416:8,11 road 124:17 215:11 rob 101:13 robbed 53:18,22 369:10 robberies 53:9,10 53:17 106:23 robbery 101:21 203:14 robust 154:25 173:10 446:12 roitman 8:5 182:4 182:18 role 185:8 308:19 308:20 309:6 310:10 312:8 350:16 359:15 390:6 394:1,5,8,24 403:5 429:3,7,8,12 430:12,19 452:6 roles 378:1 room 1:22 15:2 59:3 159:14 193:9 355:15 373:3 446:14 root 42:11 47:18 221:2 248:7
---	---	--	---

[root - see]

Page 67

334:10 383:16 395:22 396:24 rotates 402:2 rough 28:14 routes 84:20 routinely 65:10 row 362:15 rpr 1:25 rule 228:24 333:15 333:22 334:4 429:22 rules 16:25 18:3 457:3,7 461:5 462:5 ruling 8:16 9:5 264:18 265:17 268:3,4 270:17 run 442:1 451:17 runs 244:10	sampling 52:14 san 4:5 sara 8:5 182:4,17 sat 24:16 satisfaction 374:22,24 375:1 save 76:17 199:21 255:22 396:3 451:4 saved 176:21 saving 451:8,20 saw 22:17,21 31:6 43:15 47:13 50:16 54:19 55:7,15 60:22 77:23 83:16 93:17 107:11 221:12,22 239:22 439:15 saying 55:1 57:20 97:10 176:22 177:3 180:12 186:1 207:8 284:5 320:23 324:8,12 411:21 413:10 420:14 422:17 423:9 430:8,10 436:3 451:5 454:18 says 49:2 51:1 53:6 62:8 66:21 68:2,22 76:1 120:9 129:2 137:13 216:22 243:4 274:8 285:20 287:21 335:17 380:1,4 383:21 387:4 429:24 scale 50:15 141:17 scene 203:12 232:5,9,14,15,19	233:13 235:24 338:10 school 21:23 244:17 schools 21:22 59:20 60:11,14 schutte 3:9 6:10 16:1,1 370:14 398:7,11 415:17 415:20 426:16,20 427:16,21 430:3 455:2,8,14,20 456:3 science 172:11 198:9 scientific 411:11 scientifically 417:4 scope 233:20 282:1 323:5,19 324:8,14,16 325:7 325:15,25 326:8 327:23 330:13 332:17 342:2,16 342:18 343:12 345:13 360:1 370:11 scott 3:9 16:1 398:10 scott.schutte 3:11 screen 337:10 338:3 screening 229:1 screens 164:9 script 100:19 121:11 scripts 100:23 seal 172:14 459:6 461:15 462:21 search 438:14	seat 66:2 198:14 426:6 second 7:3 19:21 22:3,7,12 37:7 62:12 68:19 134:6 209:7 211:7 214:16 216:19 220:15 222:23 228:18 230:3 243:13 247:2 270:3 279:16 326:16 331:15 336:9 347:25 366:22 379:5 387:2 404:2 430:4 455:22 secret 177:7 section 50:6 53:3 64:9 282:25 283:2 287:10 335:21 380:7 387:25 428:2,12 see 34:10 43:24 44:6,14,20,22,23 45:5 46:6,10 49:6 50:6 51:5 53:4 55:19 56:3 58:7 62:7,11,19 63:6 64:2,12,16,21 66:7 66:19 69:3,9,10,10 69:15,21 70:5,6,11 70:16,17 73:21 74:20 82:7,23 88:24 95:8 97:10 100:13 112:11,13 120:16 125:25 129:8,12 164:11 177:21 189:3 190:9,25 191:10 197:10 207:8 221:1,3 247:14
s			
s 4:14 145:9,9 239:20 460:15 462:8,8 463:3 safe 172:15,16 179:16 306:20 312:12 333:9 352:14 369:2 safety 24:24 27:24 211:22,24 214:5,7 243:17 350:9 401:5 sale 240:9,18,19 240:22 salerno 2:6 15:15 15:15 sales 254:7,15,16 254:17 255:10 samaritan 452:5 samples 176:4 338:1			

[see - sheriff]

Page 68

260:13 273:23 274:9 275:11,13 283:6,11 287:7 288:9 296:15 297:6 298:14 310:19,19 311:15 315:9,10 317:7 320:21,23 322:22 329:16,18 331:12 331:20 336:13 340:6,9 361:16 366:23 380:9 382:16,25 386:15 387:3,7,8,9,18 388:2,3 397:19 402:15 411:25 427:7 428:21 436:5 455:5 seeing 46:4,4,18 46:23 59:8,10,23 66:22 84:25 90:18 95:9,10,11 153:21 248:12 251:11 275:6 299:20 300:9 356:20 373:22 439:14 454:4 seek 55:5 84:20 98:18 187:15 196:3,5,21 223:15 224:22 226:24 seeking 44:17 47:11 53:11 58:14 83:14 84:3 112:25 113:13,14 121:11 137:24 159:18 192:19,20 193:6 194:15 204:3,23 205:4,9,14 239:8 242:18 246:21 262:16,16 396:20	431:21 seeks 196:13 seen 20:6 22:15,18 41:20 47:13,15 48:7 49:23 57:9 61:15,22 65:3 67:4 68:5,6,10 72:25 84:13 88:19 89:3 90:15 91:13 91:20 98:25 99:17 106:11 111:6 118:15 119:11 129:15 136:19,21 137:1 138:25 145:6 146:18 154:21 167:11 177:17 258:16 259:14,20 263:2 269:7 271:17 273:15,20 280:17 280:19,20 281:9 283:24 286:24 290:24 300:14,16 307:18 354:11 357:14 379:14 381:4,15,17,20 386:8 389:25 411:13 412:14,16 454:25 sees 82:23 420:2 segment 401:1 selected 55:14 selector 251:16 self 73:18 115:12 116:15,18 sell 240:10 selling 263:3 semi 7:9 61:10 semiannual 61:3 senate 19:14	send 176:4 sending 341:12 sends 193:5 sense 135:18 192:24 193:18 233:24 239:16 275:14 sensibility 248:6 sensitive 14:4 sent 280:3 281:16 382:11 sentence 50:25 52:4,13 274:8 283:10 285:3 331:15 335:5 336:6,9,12 sentences 288:12 separate 62:23 131:6 204:7,19 205:15,21 219:18 238:17 239:5 249:21 292:16 359:24 separates 205:20 september 459:17 series 269:13 seriously 198:13 430:5 servant 25:4 servants 212:11 serve 154:5 served 19:20 296:24 349:19 service 28:5 30:24 73:1 196:20 197:1 197:23 203:25 238:2,3 services 7:9 60:5 61:3,9 187:22 196:17 197:2,17 197:19,21,22	202:5 204:17,18 212:9 231:4,12 238:1,14 239:3 247:6 257:17 258:23 259:3,3,7 400:14 402:23 403:4 serving 174:15 set 7:24 8:3,8,10 8:15 74:8 126:18 128:8,15 131:6 136:6,13 236:7 255:8 264:3,6,16 269:20,22 270:15 286:3 291:16 330:19 403:2 419:23 459:6 setting 193:22 200:11 274:24 330:16 433:20,22 434:3,8,17 435:2 435:11 438:17 seven 20:19 24:7 shane 25:25 shape 171:20 400:24 shapiro 27:22 share 159:4 shared 23:15 73:9 298:4 sharply 51:23 she'd 151:6 sheer 195:10 sheet 460:13 462:7 462:10,18 463:1 shelly 241:6,24 sheraton 1:21 14:16 sheriff 88:21 165:11
---	---	--	--

sheriff's 24:21 26:14 48:19 55:18 148:22 149:11 150:5 165:3 166:2 166:14 203:10 207:9 256:21 shift 44:6 154:17 201:16 232:8 246:18 248:16 354:17,20 375:11 375:15 378:7 shifts 43:4 154:16 shipment 123:25 126:4,9,22 127:2 shipments 123:21 125:24 127:15 417:24 shoes 115:7 shoot 77:18 shooting 157:22 shopping 98:3,7 98:20 99:3,25 100:12,14 short 397:2 shortly 31:7 shot 426:17 show 377:10 401:9 401:10 402:7 403:25 shown 28:19 154:6 260:18 368:9 460:16 shows 439:20 shut 32:6 216:4 sic 30:10 sick 36:20 98:14 104:17,20,20 105:14,16 106:12 106:16 110:23 251:4 262:15 392:13 394:20	sickest 84:23 sickness 262:3 side 157:9 198:23 198:24 sided 270:4 275:6 348:1 sign 45:10,11 226:11 306:18 374:16,21 375:6 375:12,16 376:24 388:6 389:10 430:24 431:2 signature 457:5 459:13 460:14 signed 461:13 462:18 significant 59:10 68:24 72:15,18,19 141:11,15,19 156:9 263:9,13 331:19 429:8 440:1 significantly 66:15 signing 460:19 signs 229:19 361:25 silence 174:14 silver 154:4 similar 389:25 similarly 332:6 simple 392:19 simply 126:5,23 158:22 392:10 sincerely 460:21 singer 9:1 265:13 280:11 287:10 291:23 299:24 singer's 284:4,14 288:1 single 23:12 193:20 257:25	321:24 403:16 405:2 sir 460:10 sit 33:18 76:9 82:4 177:7 254:11 256:19 325:18 332:19,20 424:8 site 244:3 251:16 sites 243:24 245:7 245:23 sitting 95:7 255:14 279:2 396:5 426:6 437:11 situation 48:21 104:16 117:11 158:16 175:13 176:14 235:23 236:10 261:18 262:19 situations 19:9 85:22 96:22 114:10 164:17 six 20:17 28:3 32:18,18,25 148:18,18 223:13 345:22 380:2 452:1,3 sixth 64:11 size 127:7 195:23 250:3 417:23 skill 236:7 skilled 208:9 skip 118:24 237:16 243:12 skoda 24:25 26:2 26:16 73:19 75:2 75:13 296:10 356:5 404:17 407:8 skoda's 29:25	slide 83:16 338:25 372:14,24 slides 73:20 368:8 368:9 372:12,14 373:2 435:15 slog 288:23 slow 304:7 392:5 small 80:22,24 148:15 196:19 225:19 smaller 66:5 450:15 smart 180:24 smith 58:24 74:5 75:12 163:5 164:1 245:19 295:3,11 295:19 296:5,8 356:7,10,11,21 361:24 381:22 440:7 452:17 453:11 smith's 356:17 377:7 381:25 386:23 smuggled 111:17 sober 216:10 soccer 154:9 social 238:3 sold 111:16 solely 448:14 solo 209:6 solutions 4:11 460:1 463:1 somebody 35:17 86:8 91:8 100:15 106:6,15 113:13 116:11 121:10 134:17 166:1 175:3 180:6 220:7 233:21 252:12 261:1 425:19
---	---	---	---

[somebody - specifics]

Page 70

441:7,19 someplace 261:23 442:3 son 241:6,25 song 18:8 sonya 4:4 16:8 soon 116:15 178:15 sorry 16:13 24:2,3 25:9 27:19 28:18 41:4 58:8 65:3 67:3 70:11 102:13 110:7 124:25 127:20 165:17 190:13 191:17 206:15,23 211:11 238:21 271:8 280:13,22 282:5 288:21 304:6 311:4,8 333:17 335:11 339:2 341:16 373:10 383:5 388:20,23 389:2 390:20 404:16 417:19 427:20 445:24 454:11 sort 21:22 26:18 26:20 28:20 30:5 30:24 31:11 32:20 32:24 35:21 37:14 38:1,3 40:3 43:2 44:2 45:20 46:24 55:25 56:1 59:5 60:1 78:6 80:9 84:5 85:12,21 96:15,18 106:9 107:20 124:9 127:6 130:17 132:19 134:12 137:22 141:24	150:12 152:7 153:12 157:25 167:15 170:25 179:21 186:11 187:24 188:11 195:6 212:10 216:2,13 221:8 222:13,14 233:23 244:18 246:22 248:5,16 278:2 281:8 290:14 291:24 299:24 306:18 321:9 338:11 361:4 362:14 363:17 364:14 367:24 374:1 375:11 377:25 379:4 380:24 381:6 403:23 432:11 436:24 440:13,24 442:1 444:10 446:8 sorts 134:8 sought 162:21 170:24 221:6 223:22 228:8 sounds 278:10 source 76:11 146:23 148:20 158:18 229:15 241:19 243:1 275:21 276:9 291:9 309:18 319:1 324:24 329:1 332:7 369:6 sources 149:2 229:19 302:18 303:13 308:21 414:7	south 2:7 southern 92:17 space 44:11 45:12 72:11,21 74:12,13 94:18 240:12 262:10 362:12 spaces 249:14 span 115:23 spanned 186:7 speak 18:10,17 25:14 49:22 50:16 143:25 187:22 193:13 234:21 253:15 257:4 268:16 292:25 295:4 350:4 450:14 speaking 28:22 343:7 422:22 special 7:21 9:1 100:17 118:2,11 132:18 236:11 265:13 267:17,21 268:8 269:5 274:21 281:2,4,16 282:13 294:21 305:18 306:2,3 347:8 349:6 366:21 397:15 417:8 specialist 145:14 specialized 227:21 specific 23:9 45:4 45:14 75:1 98:24 113:9 131:10 158:9,10 168:3 172:3 201:17 202:8 208:23 213:1 215:18 219:13,22 220:1,3 220:10 225:24	226:7 229:23 230:24 231:5 246:4 253:5 254:1 259:8 280:1 312:15 330:19 349:24 352:5,7,24 353:2 355:13 357:19 359:24 368:3,8 370:9,10 371:23 372:8 375:18 376:22 390:14 413:23 421:23 422:3 440:7 specifically 28:4 30:7 56:18 57:18 59:18 64:4 74:24 75:15,17,18 76:6 89:7 92:14 100:9 121:13 140:8 149:20 153:17 170:3 174:25 181:5 188:18 197:24 202:14 203:8,20 206:4,8 210:8 212:6 213:2 215:17 235:2,3 239:9 259:12 268:19,25 281:23 312:19 328:1 334:9 350:6 365:6 367:10 368:14,22 375:7,20 377:11 377:18 386:25 399:25 415:8 426:8 433:15 445:17 447:21 451:9 specifics 163:4 189:7,18
--	---	---	--

[specified - statutory]

Page 71

specified 244:8,14 458:21	spreadsheet 8:18 8:21 9:6,9 264:23	176:18 178:20 185:24 187:9	193:3 223:18 224:11 225:8
speculate 262:23	265:5,22 266:4	188:12 222:5	252:21 354:3
speculation 261:6 301:21 321:7 441:10	271:16 279:22 283:14 288:5	223:7 260:14,16 294:18 306:24 398:14 401:16,23	363:5 364:21 381:2 446:16,18 453:14 458:2,7 459:15 461:10 462:15
speeches 187:6	spreadsheets 271:10,17,21,24 272:2 273:10	404:1 406:1,7 434:1	state's 20:6 173:13 175:11 176:12
spell 145:8 398:24	277:21 283:23 290:22 291:16	started 32:19,20 35:15 43:17,24	stated 140:12 169:4 381:13,24 388:15 396:18 407:24 420:20
spend 198:6 227:9 399:18	292:14 326:4 432:17	44:6,14,20,21,23 44:24 46:6,10,17 47:10 58:11,20	statehouse 354:20 statement 50:12 51:7 52:1,20 53:13 185:6 186:4 186:5 321:8 461:13,14 462:19 462:19
spending 20:5 87:11 187:12,13 187:19,20 203:24	springfield 240:16	73:22 76:2,8,13,16 76:24 77:6,7 79:16,17,19 80:12	statements 290:14 states 1:1 129:3 315:21 327:15 359:11 369:19 370:5
spent 20:19 87:6 154:1 176:11 186:1 188:17 200:17 202:15,17 202:18,20,22,24 203:2 211:24 212:3,5,18,23 215:4 222:17 227:10 399:24 452:9	sprung 211:19 square 4:15 sraiola 4:10 ss 458:3 stable 321:4,15 323:8 stacking 45:2 staff 17:17 27:16 27:22 163:9 211:23,24 213:19 402:24 451:12	86:6 95:8,12 107:22 137:18 142:19 160:20 187:11,25 194:10 220:25 221:3 222:6,15 232:2 241:17,20 242:18 275:25 294:23 342:25 350:18 351:9,13 367:25 376:2 405:3,21 406:2,6,16,19 410:3,16 412:17 414:10	statistic 75:25 162:2 statistical 54:14 54:18 55:12 statistician 440:17 statistics 28:23 55:19 75:6 146:8 148:21 152:8 206:10,17 207:4 209:10,11 372:18 374:4 439:18
spoke 338:11 343:17 349:20 350:7,9	stand 179:24 314:11 412:21 413:18	starting 52:10 58:24 223:6,6 408:4	statute 251:2 statutory 442:10
spoken 24:13,20 354:10 381:23 415:3	standards 9:17 385:24 386:14 387:7	starts 56:1 157:12 179:10	
spokes 213:22	standing 197:11 214:3 368:14 436:3	state 19:14 21:23 28:8 89:10 142:25 147:5 173:5,7,21 174:6,21,22 175:6 175:12 176:13,23 177:13 184:17	
sponsor 173:20 174:8	stands 143:13 256:20 280:22		
sponsored 174:4 174:23	start 58:7 59:14 73:13 76:22 77:11 78:1,11,14 79:5 131:23 134:12 140:4 141:10 151:20 175:16		
sponsoring 177:4			
sports 35:9 333:11			
spotlight 154:5			
spread 384:17 385:9			
spreads 260:17			

[stay - summit]

Page 72

stay 102:19 262:1 stayed 409:3 staying 339:6 steadily 46:21 steal 101:11 104:19 stealing 112:10 steals 106:5 stella 24:20 149:6 149:8 152:15 163:23 166:2 169:20 stenotypy 458:14 step 83:2 250:19 452:13 stephen 1:25 4:7 16:6,21 458:6 459:14 stepping 339:5 steps 97:11 stepsister 43:3 sterbenz 26:3 82:2 steve 26:3 stick 404:3 sticks 177:22 233:5 400:22 sticky 29:14 stimulants 51:18 stole 104:17 105:25 106:11 stolen 55:3 105:22 105:23 106:14,19 106:22 199:12 stood 109:3 179:17 stop 100:12 122:1 157:12 221:11 348:19,20 stopped 295:6 452:1	stories 362:17 368:18 432:16 story 34:15 159:4 stow 63:23 247:4 straight 77:18 152:14 strain 255:2 strategies 92:20 198:15 strategy 93:8 180:1,3 stray 144:18 stream 199:24 200:2 streams 224:19 254:2,6 street 1:22 2:20 4:4,8,22 14:17 53:23 59:5 77:18 166:5 179:24 261:12 394:9 407:6 409:1 411:13,14 streets 452:4 streetwise 84:17 stretches 180:20 strike 83:12 107:6 164:23 191:23 285:1 289:22 310:23 321:1 323:12 343:24 352:6 360:10 363:15 367:15 368:2 372:23 377:5 380:16 382:3 384:19 387:19 401:23 408:11 421:14 strip 230:13 strips 30:2 86:6 202:16,20 222:20	245:15 strongly 30:21 struck 260:11 372:20 structure 214:23 447:9 struggling 253:13 studies 54:15 55:12,13 study 54:18 76:1 250:7 407:19 411:11 412:13 414:5,7 stuff 165:19 208:25 423:17 subcommittee 436:11,15 subcommittees 436:12 subject 21:18 129:2 148:21 173:21 185:18 219:17 326:17 373:24 subjects 442:14 submitted 8:16 264:17 270:16 316:6 359:25 subpoena 296:21 296:24 297:3,5 subpoenaed 277:4 277:8 subscribe 384:14 subscribed 461:10 462:14 463:21 substance 83:14 184:15 185:4 substances 129:6 129:20 184:3,6 185:7 219:6 249:4	subsys 317:3,19 sued 416:13 suffer 331:18 suffered 185:23 192:1,8 204:4,24 286:4 331:18 suffering 42:6 84:16 138:9 153:19 211:8 214:19 216:25 217:15 223:2 228:17 352:20 suffers 205:7 sufficed 103:1 suggest 94:17 249:19 443:15 455:2 suggested 183:18 292:9 391:20 suggesting 348:4 442:25 443:11 suggests 390:21 suite 2:15 3:5 4:15 460:2 suites 1:21 14:16 summa 231:3 summit 1:11 2:2 7:4,6,7,13,16,18 7:22 8:1,6,12 9:11 15:6,10,13,16 17:14 20:20 21:3 22:9,14 23:3 24:21,25 25:4 26:10,14,18,23 27:15,20,24 31:14 33:2,8,20 42:3 45:18 47:4,9,21 48:2,3,18,19,22 51:2,19 52:8 53:8 53:10 54:15 55:16 55:18 58:10 60:8
---	--	--	--

[summit - sure]

Page 73

62:6 63:11,13,16 63:21 64:3 65:5,6 66:3 67:16,21 70:1 71:21 72:21 74:1 75:16 76:4 77:20 80:17 81:16 82:8,17 83:3,10 84:11 86:6 87:6 88:15,22 89:8,11 89:14,18 90:4,4,21 91:13 92:1 93:10 100:24 102:21 104:4 105:9 106:20 108:7,17 108:22 111:17,24 112:20 115:24 117:24 118:6 120:10 121:18 122:25 127:8,13 127:14,21 128:1,6 128:12 136:3,10 137:10 139:24 142:25 145:24 146:9 147:1,2,10 147:11,14,25 148:3,4,13 149:10 149:19 150:12 151:13 152:1 154:21 158:15 160:15 161:5,18 161:19 162:13,21 164:20,21,24 166:12,13,15,22 168:4,25 169:25 170:7,21 171:1,5 172:1,18 174:15 175:1,19 177:12 177:16,19 179:13 186:1 191:25 192:7,18 193:4 194:15 196:13	197:24 198:16,19 203:10 204:3,8,9 204:11,13,21,23 205:8,13,22,24 206:5,11,18 209:24 210:9 212:8 216:4 217:13 218:3,10 218:13 239:6 244:1,22 247:8,8 247:12,18,20,21 249:5,20 250:9,15 250:17 251:17,23 253:7,16,24 254:21 255:1,6 259:21 261:3,18 261:21 262:8 263:2,25 264:12 266:11 269:17 270:13 273:4,9 278:6,16 285:22 289:4,7 295:1 296:4,11 304:1,8 304:21 305:7,12 308:13 310:7 312:7,14 313:16 314:5,8 320:6,12 320:16,17 321:2 321:12 323:7 328:17,21 330:9 332:10 333:1,14 333:21 334:3 336:20 349:5 350:3,5,11,14,25 351:15,23 352:8 352:25 353:6,16 353:24,24 354:10 354:11,25 355:7 355:12,17 356:13 357:19,20 358:3,4 358:4,18,22 359:2	360:11 361:10,19 361:21 362:5,19 362:25 363:11,14 363:16,24 364:2 364:13 365:1,4,5 365:16,17,19 366:9,19 367:2,5 367:14,16 369:5 371:25 372:19 373:12,15,17 374:7,9 376:19 377:13 379:17 384:4 385:2 390:7 390:16 392:14,23 394:22 395:3,13 396:12 397:17,24 399:16 400:14 403:15,16 405:2 406:23 407:25 408:2 415:24 419:3,18 420:3,8 423:25 424:23 428:14 429:10 430:16 431:21 433:6 434:2,4,7,18 435:1 438:24 439:8,21 441:22 445:13 446:3,25 448:3,12,19,24 449:21 453:19 454:3 summit's 308:1 309:5 328:11 360:9 summit0000203... 7:10 61:11 summons 160:17 super 174:6 superior 460:1 supervision 308:10	supplemental 7:19 8:13 117:25 118:7 264:13 270:13 285:14 supplied 85:25 suppliers 85:23 supply 92:1,4,6 102:9,10 104:1 260:22 305:23 384:8 supplying 105:7 support 196:25 200:9 241:12 247:17 254:23 390:12 449:10 supported 195:8 suppose 87:2 101:6 144:17 158:19 supposed 202:10 409:2 sure 18:18 22:17 22:23 24:6 25:12 25:15 27:19,19 31:22,25 37:8 38:9,14 39:25 40:20 41:21 49:10 51:9 52:5 57:22 57:22 60:24 62:1 63:20 64:12,25 65:2,16 66:22 67:7 75:5 77:21 78:16 79:6 81:2 86:16 87:22 90:7 90:9 92:14 98:23 99:1 103:11 112:24 113:6 114:8 122:15 126:14 131:25 134:23 137:8 139:23 141:3
---	--	--	--

[sure - talk]

Page 74

143:11,12 145:6 148:19 157:4,5 163:2,8,20 166:23 168:15,18 169:6 181:22 183:22 185:16 188:14 189:19 190:10,22 192:3,6 194:25 195:7 197:6 201:19 206:17 211:13 220:18 228:6 230:19 232:13 235:14,18 236:9 237:1,23 238:19 243:20 255:20 261:8 263:19 267:3 282:4,7 287:3,20 289:2 290:23 293:10 295:8 301:24 304:8 308:10 309:4,10 309:13 311:13,13 331:11 335:12 347:4,6,18 348:5,8 348:23 350:1 353:19 355:20 357:24 359:1 361:15 369:24 370:1 379:10 383:7,7 403:21 408:24 409:10 412:12 413:23 421:16 426:3 434:14 441:5 447:24 449:4 451:12 452:24 454:1,1,2,5 surg 36:7 surgery 36:15,24 83:8 102:15	surgical 98:16 306:15 452:13 surmise 443:2 surprise 85:14,18 341:1 381:8 surprised 381:3 surprising 256:18 surround 45:17 surrounds 45:16 survey 7:12 67:20 68:3,9,15,19 411:11 surveyors 256:24 surveys 374:24 375:1 suspect 114:3 147:17 150:24 180:4 suspected 113:4,6 113:16 310:1 341:10 suspicion 122:12 suspicious 120:14 122:2,9 123:8 129:6,20 130:4,7 132:13,16,20,25 132:25 133:21 134:25 168:5 416:21,25 417:9 sustained 35:9 swear 16:22 275:14 swifter 173:10 swinner 4:6 switch 20:3 85:6,9 85:15 263:17 368:4 switched 145:12 sworn 17:1 150:4 410:20 458:10 461:10,13 462:14	462:18 463:21 synthetic 37:12,13 38:3 system 21:23 27:1 27:1 54:25 96:4 155:3,4 204:16 213:9 215:5 217:24 247:11,13 257:17 259:11 441:22 system's 231:3 systematically 329:23 t t 3:9 38:1 170:10 t21 198:7 201:3 202:18 222:17 tab 29:15 table 117:16 393:18 tactical 150:1,2 tail 403:23 tailored 210:5,14 tainted 423:13 tak 139:15 take 20:9 29:1,11 36:16,16,17 37:1,4 44:16 83:2 91:9 102:18 143:22 174:13 183:19 186:12 187:11 189:5 192:2 198:12 200:25 201:12 210:16 236:24 244:7,18 245:8,24 266:24 277:16 290:18 311:11 313:1 328:19 331:3 348:21 349:1 363:24 365:25	366:13 397:2 415:7 423:15,19 423:21 433:10 434:8 449:22 452:11 455:3 taken 1:20 14:18 17:23,24,25 24:11 36:2 67:10 80:1 102:15,16 104:6 125:6 181:25 201:2,3,4,8,17 208:22 212:7 237:4 263:22 313:5 338:1 346:22 366:4 370:22 393:6 397:6 455:11 458:20 takeover 21:23 takes 198:14 talent 176:11 talk 37:7 54:21 55:22 58:25 60:20 73:17 76:15 97:21 140:7 148:24 155:11 159:2,23 160:12,14 192:25 226:6 229:16 235:8,25 239:13 243:13 245:14 248:1 254:13 268:21 293:23 295:11 298:2 300:19 311:5 317:17 349:10 356:7 381:21 410:14 413:25 421:1,2 425:21 432:18 433:18 447:14 453:10
---	--	---	---

[talked - testified]

Page 75

talked 42:20 49:17 71:16 82:2 97:25 98:1 115:23 149:15,24 150:20 153:7,12,15,17,23 154:18,20 155:16 155:18 163:22 168:21,22,23 185:8 186:8,9 188:9 232:16 235:7 238:9,13 241:21,23,23 243:22 245:9 247:17 258:5,25 259:14 260:12 296:20,24 297:10 311:17,21 316:15 349:13,16 357:1 358:7 365:7,8 368:25 369:11 372:4 404:15 412:11,24 413:2,5 413:14 414:6,8,19 414:22 427:7 428:11 435:4,5 436:7 437:12 445:23 talking 31:20 54:4 55:22,24 56:22,23 57:5 60:16 73:18 78:4 87:15 99:2 122:3 130:13 154:18 181:3,5 187:9 189:15 193:23 209:25 225:5 229:18 233:20,22 237:13 254:15 258:6 260:11 323:22 346:5 357:11 366:9 406:21	412:8,9,14 415:19 450:21 talks 74:7 89:7 154:9 195:21 202:4 222:14 229:15 254:14 256:1 tanf 228:4 tangibles 361:3 taper 423:9 tapered 321:5 targeted 170:3 210:6 targeting 198:22 445:17 task 9:14,14 59:22 65:6 73:19 89:9 149:12,17,25 166:15 169:20,21 169:22,23 170:6 170:15 211:17 222:9,11,13 245:2 350:18 351:8 352:10 354:8 355:7,18 356:13 356:24 362:1,23 362:25 363:3,8 367:22 368:4,19 371:22,25 372:1 377:14 378:14,15 378:23 379:17,18 390:1 395:8 396:11 405:17 410:6,7 434:13 435:13 436:8,13 445:4,11,16,20,23 446:10,15 447:17 448:6,9,11,18,20 448:20,24 453:19 454:3	tasks 211:17 tax 195:21 209:24 223:20 250:2,6 251:14 252:24 254:2,6,7,14,15,16 254:17,17,19,21 255:6,10,11 432:9 tc Coleman 4:18 teach 234:8 team 24:6 130:18 446:19 447:7 teammates 35:21 teams 199:15,16 208:16 209:13 222:5 233:12 234:12 technical 371:1 technically 26:17 technicians 66:8 techs 66:22 teens 44:16,19 56:2 58:23 60:9 137:18 141:21 221:7,25 telephone 4:12,20 5:4 239:25 telephonic 194:19 tell 82:4 150:9 151:5 152:21 155:14 192:13 212:23 220:12 302:23 400:11 405:25 437:21 telling 175:3 368:25 374:1 420:5 tells 412:4 tenants 240:21 tend 29:17 151:20 338:4 383:14	tended 116:14 157:2 tendering 408:13 tense 258:7 tenth 4:8 tera 4:14 term 19:20,21 20:4 39:11 42:12 42:18 57:8 96:8 108:14 109:20 162:19 171:1 216:18 281:7 304:20 360:25 361:11 369:11 383:25 384:11 389:13,13 390:7 392:7 418:16 420:6 424:24 431:25 432:20 433:3 442:22 terminology 30:9 37:8 424:19 terms 22:21 28:14 41:25 42:4 101:8 179:7 259:4 361:17 407:2 449:1 test 176:7 250:21 421:11 tested 39:24 40:2 176:5 testified 19:5,10 19:11 21:13,17,24 307:2 322:17 324:1,9 334:2 343:10 345:10 373:4,11 374:15 378:3,7 381:19 385:13 392:2 395:3 398:15 399:7 401:18,24
---	---	--	---

[testified - think]

Page 76

403:7 409:8,11 415:15,22 417:21 424:17 425:20 430:21 431:17 439:6 442:18 449:20 452:15 testify 23:4 33:3 33:19 185:22 186:22 267:12,25 268:17 269:1 274:21 276:21 279:3 293:2 295:14 297:16 301:5 319:18 322:10 323:3 324:14 342:19 346:24 349:5 366:20 367:2,5 404:25 414:1 421:7,11 424:8 426:10 433:23 458:10 testifying 22:24 225:23 testimony 13:3 33:7,8 56:4 65:8 82:7,12 218:23 281:12 289:5 295:17 297:24 298:13 316:21 323:5 334:13 343:14 349:11 350:3 351:15 354:24 355:16 356:20 357:1,7 367:10 370:12 377:21 379:1,11 381:25 385:1 386:22 391:22 392:1,22 394:22 395:12,19 396:10	396:17 397:21 400:15 401:1,10 401:11,18 402:7 403:14 404:3,22 406:9 407:18 409:5 410:21 412:23 413:1 414:9,16 418:18 420:12,13 422:9 422:21 423:24 424:13 430:12 435:17 437:10 438:23 439:2 442:21 458:13,17 461:6,7 462:6,9,12 tests 227:23 teva 3:13 5:2 16:5 125:16 266:23 text 379:23 thank 18:11 38:20 165:8 183:21 187:2 204:5 240:4 267:19 274:23 298:23 313:9 322:23 346:2 366:8 371:1,8 389:5 397:10 398:3,5 438:1 455:23 456:2,3,5 thankfully 346:3,7 thanks 168:16 348:21 373:11 theft 101:22 103:4 246:19 248:8 428:16 theme 60:7 theorist 376:1 theory 433:5 thin 53:1 134:4 thing 18:12 32:21 50:8 54:23 60:3	78:6 104:24 105:3 105:7 114:4 140:17 145:11 187:24 205:23 211:21 256:19 260:10 278:4 351:10 409:12 444:23 things 28:17,21,25 29:21 30:17 35:15 38:5 41:21 44:13 46:6 66:8 71:15 73:6 74:25 75:8 95:8 141:7 147:18 157:8,9,12 167:14 167:18 174:21 177:4 186:22 188:8,9 195:15 198:2,22 199:14 199:18 203:2 211:18 212:3,6 215:7 221:13 229:24 235:2 245:9 246:20 258:5 299:24 303:3 333:10 375:22,23 381:3 384:7,16 385:7,9 396:1 402:2 417:14 425:17 432:10 438:14 453:7 think 18:16,20,20 21:10 22:20 23:11 23:17 25:10,10,19 26:13 27:23 28:5 36:24 42:5 45:8 47:1,3,6,9,13,16 48:16 50:19 58:7 59:16 61:23 64:10 65:19,23 66:13	70:25 78:25 80:24 82:14,15,24 85:7 87:16,23 89:11 93:2,11,15 97:25 98:2 99:21 100:1 100:13,20 102:16 103:5,10 106:5 107:17,20 108:10 108:19 109:19,20 110:8,19,20 111:14,19 113:18 114:18 117:6 121:1 122:18 124:11 126:7 127:4 134:3 136:24 138:7 140:23 142:21 143:8 151:1,1,4 157:14,18,21,24 162:14,15,16 163:16 164:1 166:4,7,19 167:18 167:21,21,22,24 168:2 169:2 170:17 171:24 173:9,15,15 178:9 180:20 181:13 184:23 185:6,7 186:8 188:16 190:20 195:2,17 195:20 196:7,15 200:23 201:10 206:6 210:22,25 213:8 220:25 221:8 222:17 224:2,6,8 225:2,15 225:17,23 226:5 229:15,19 231:17 236:15 237:17 238:5,8 241:1 244:13 248:4,15
--	---	---	--

[think - today]

Page 77

248:23 251:24	thought 37:24	tied 134:25 199:10	375:19 388:21
252:8,17 254:16	92:24 101:5,7	tighten 436:6	393:16 398:4
255:17 263:15	113:10 154:14	time 14:14 15:1	399:4,17 401:4,20
273:19,19 274:19	188:12 190:1,7,8	21:14 30:1 34:13	408:22 412:7
278:2 282:16	246:18 295:6	34:25 35:23 42:5	413:7 423:16,20
292:2 296:9,25	347:5,7 357:12	45:4,22 47:1,4,7,9	423:21 426:14,17
298:13 299:18,19	404:10 454:7	53:23 59:19 63:16	426:22 436:2
307:10 308:19	thousand 65:15	67:5 74:22 83:5	438:7,9 440:24
323:4,18 324:13	253:19 451:17	84:2 88:22 93:11	444:11 445:4,11
324:13,21 333:19	thousands 95:16	94:11 95:17 109:4	446:14 450:12
334:17 335:10	95:16 192:17	111:4 113:8,21	453:24 454:21
338:7 339:4	322:1 405:10	114:8 115:23	456:4,7 458:20
342:16 343:10	thread 7:6 48:1	117:1,7,21 119:5	timeliness 256:25
345:10 347:16	threat 7:12 47:21	120:14 125:9	times 19:13 24:8
351:23 355:5	50:9,21 51:1	138:2 140:25	29:23 86:17 111:7
359:23 360:15	67:20 68:3,9,15	141:17 143:9	141:8 176:3 186:6
362:10,11 364:1	82:17 427:8 428:8	154:8 156:21	227:16 229:4
370:8 376:11,11	453:18	157:3 159:5,25	236:19 239:15
376:21 379:2,3	threats 82:8	160:10,22,25	281:10 352:16
380:23 385:13	three 102:9,25	161:15 162:18	362:22 368:17
391:25 397:3	130:19 139:12	174:19 176:10	396:22 399:5
403:2 418:12	174:7 247:1	177:16,20 181:20	408:20 431:17,25
424:12 425:25	291:24 292:17	195:15,16 198:6	436:16
431:4,5 436:10	293:6,13 294:9	199:10 200:17	timing 381:7
437:17 438:22	303:3 316:12,14	201:11 203:25	393:10
440:5 442:22	316:15 317:16	208:19 209:1	title 74:3 380:7
448:21 449:7,18	319:10 320:2	214:12 218:13	400:12
452:6 453:21	328:20 329:15	220:23,24 222:18	titled 7:5,8 8:18,21
455:25	340:16 343:23	222:19,21 223:16	9:6,9,13,16 48:1
thinking 59:17	344:6,13,14 345:1	224:7 234:18,19	61:8 88:9 117:23
212:10 373:20	345:25 347:4,5	237:6 251:16	264:23 265:5,22
375:11	387:3 414:7	252:14 255:22	266:4 283:3
third 7:24 128:8	428:18 436:1	262:8 263:11	378:13 385:22
128:15 209:21	threshold 285:4	298:15,23 310:15	387:25
235:6 270:22	285:12,24 294:14	312:13 318:11,19	tobacco 198:9,10
301:25	295:25 307:15	331:3 345:2	today 14:13 18:5
thirds 129:1	321:9	351:18,23 352:9	22:24 23:4 30:19
thirty 460:18	throes 411:20	353:18 354:2,14	33:7 38:7 56:14
thoroughly 31:10	throw 177:21	354:21 362:24	56:21 73:2 76:9
50:14 211:3	throwing 176:20	363:4 368:1 372:1	82:4,9 103:9
		372:13 373:7	108:23 114:24

[today - treated]

Page 78

117:8 140:13,19 142:11 183:1,7 188:16,22 243:23 254:11 255:14 258:8 267:13 268:11 271:18 273:18 276:22 279:3 280:18 281:12 290:25 292:16 293:3,23 297:20 298:21 300:14 304:7 319:19,20 322:9 325:19 332:20 334:11 343:14 348:20 349:24 380:12 389:7 397:23 399:19 400:9 421:7 424:8 427:8,24 430:22 431:17,25 435:18 436:6 455:24 today's 23:7 330:25 367:8 told 35:18,20,25 150:19,19 151:2 155:7 177:7 241:22 242:3,12 242:21 263:7 295:22 317:20 352:14 406:14 tolerance 392:8 tomorrow 248:20 249:2 258:10 tone 256:7 tonight 160:16 tonya 26:2,17 tool 141:21 142:21 143:1 150:21 tools 57:23 165:8 235:1	top 49:6 68:2 120:8 197:13 268:25 331:13 335:17 386:15 387:2 topic 23:12 87:15 87:16,23,24 94:7 188:23,24 229:14 285:22 297:17 298:9 313:13 346:13,16,25 349:1,6,12 350:4,6 361:17 362:3 385:2 415:12,18 418:20 419:18,23 421:3,6 424:2,2 426:10 429:17 430:6 433:24 444:24 445:4 topics 8:10 23:10 23:15 33:4,12,16 33:20 182:22 183:23 185:19 264:7 267:5,6,7,9 267:13,23,23 268:18,22 269:1 276:21 282:11,12 295:14,17 316:21 343:11 346:3 349:15 366:15,18 366:20 367:1,3,11 397:14,17,18 415:10 423:22 433:14 445:14 torch 444:11 total 23:25 51:16 81:19 83:21 192:21 touched 163:20 445:2	touches 284:23 touching 163:17 447:6 tough 109:20 195:3 205:11 tourniquet 452:12 tower 4:15 townships 166:21 toxicologist 338:11 toxicology 336:25 337:9 338:3 trace 94:25 158:18 track 214:11 278:23 371:3,5 tracked 212:15 249:17 259:3 tracking 249:23 259:7 tract 240:8 traffic 21:1 92:19 209:3 trafficked 147:19 trafficking 21:8 56:6 63:15,24 68:25 147:15 170:11 trained 151:6 160:13 234:12,25 235:16,21 training 150:7 151:11 168:2,3 227:21 231:20,25 232:21 233:8,10 233:16,19,20 234:1,4,14,20,24 235:12 236:1 transcribed 458:16 461:7 transcript 6:1 30:1 49:19 356:18	377:10 457:3,6,9 457:11 460:11,12 461:5,12 462:5,11 462:17 transcription 458:17 transcripts 24:10 25:18,21 400:4,7 452:16 transfer 216:2 transferred 216:5 transition 19:25 149:16 404:18 transitional 215:13,16,18,20 216:10 217:5 transitioned 403:21 transitioning 404:21 transpired 287:9 transportation 69:1,14,20 trap 106:10 travis 241:5,24 treadmill 29:17,19 32:11 treasure 176:11 195:17 treat 40:10 75:23 76:18 95:13 115:8 115:15 211:20 306:20 333:10 334:22 352:15 362:11 375:2 391:21 451:16 treated 159:15 232:7,9,15 283:16 287:16 289:13 300:22 301:14,17 301:18 302:5,12
---	---	--	--

[treated - underlying]

Page 79

302:20 304:3,10 306:5 311:18 treating 60:4 76:17 365:14 treatment 44:17 47:11 76:15 83:11 83:14 84:3 87:12 117:14 153:24 159:8 175:24 187:23 195:5 217:2,4,19,24 219:3,5 220:9 221:6 226:23 227:2,8 228:14 230:7 231:5,21 233:6 238:2,15 239:3,21 240:6,7 240:12,25 303:10 303:15,23 306:14 312:12 327:12,14 365:9 396:20,21 405:19 410:8 446:13 447:2,3,20 447:22 449:5,6,8 449:10 451:10 triaged 452:12 trial 19:12 tried 280:14 408:8 434:17 tries 55:11 trip 45:17 troops 82:23 troubling 233:5 true 47:18 50:12 59:16 352:17 376:20 392:10 458:16 truly 186:13 272:8 368:16 trust 82:19 179:12 180:23 194:8	369:15 391:9 trusted 179:14 trusts 391:7,7 truth 458:11,11,12 truthful 53:13 try 18:13 32:10 58:13 84:19 116:1 131:24 136:24 159:22 160:19 161:7 178:12 195:12 196:25 221:11 272:4 310:17 311:14,14 387:20 404:19 trying 18:22 30:11 46:14,15 59:4 76:17 93:24 103:11 113:24 115:5 117:11,12 126:2 131:18 154:1,13 155:17 186:2 187:11,14 193:1 194:12 195:7 199:20 200:21 211:25 248:14 251:15 253:9 282:5 311:6 311:8,25 322:11 322:24 362:10,11 394:17 404:24,25 413:3,21,22 432:3 435:8 443:14 448:3,4 451:4 tucker 3:4 15:24 15:24 tuckerellis.com 3:6 turn 14:6 48:24 50:3 62:12 64:8 68:1,18 118:21 120:7 128:23	185:17 195:11 228:11 239:24 244:8,18 263:16 270:21 326:15 427:12 433:13 turned 50:23 224:20 241:9,18 443:19 turning 33:1 246:12 326:13 330:22 tweaked 181:16 twelfth 2:20 two 20:21 36:23 36:24 39:1 43:21 54:6 59:9 64:11 95:25 100:15 119:7,9 120:3 129:1 150:1 158:24 166:7,9 174:5 203:9,17 205:14 225:16 232:12 239:5,19 244:14 246:25 276:13 284:7,23 288:12 292:5 303:19 312:1 328:20 344:14 392:6 427:16 428:18 type 62:17 107:7 251:20 279:11 293:8 402:1 438:9 typed 347:13 types 38:5 44:13 57:11 65:11 140:14 151:21 209:8 221:13 312:11 typical 45:17	typically 49:11 98:9,11 116:13 159:4,7,17 160:12 166:8 199:19 232:12 252:13 278:4 381:3 u u.s. 14:21 uh 25:17 26:22 41:24 50:4 51:4 60:15 62:14 64:21 97:24 100:18 118:23 120:17 123:19,23 134:9 160:23 163:24 165:23 171:19 172:12 191:5 209:19 211:16 215:25 218:6 220:20 223:4 231:23 243:15 244:21 294:1 309:10 314:18 319:23 342:4 351:21 360:21 372:7 373:6,8 374:17 382:16 421:5 436:20 445:9 ultimate 142:1 146:22,22 unauthorized 304:3,10 305:14 uncommon 77:16 156:22 404:15 undercover 150:14 underemployment 252:19 underlying 303:21
--	--	--	---

underneath 387:4 388:4	271:6,25 272:17 274:17 275:16,24	unfair 84:10 185:6 201:22	upwards 358:23
underreported 162:19	276:4 277:7,11,14 278:19 279:2,12	unfamiliar 30:13 149:21	urine 164:9 338:1
understand 18:2 18:16,21 19:3 23:2 33:2,6 34:6 37:10 41:17 72:13 78:25 124:12 131:18 174:23 187:1 191:21 205:5 226:10 259:17 268:4 272:3 279:8,9 281:20 282:7,16 282:19 288:20 311:7 312:1 319:21 322:11,24 333:18 336:17 345:16 359:4,8,12 361:24 374:4 376:2 382:5 383:18,20 390:8 390:10 400:25 404:24 408:10 409:17,22 412:7 412:12 413:24,24 416:7,11 417:19 420:25 425:23	281:15 283:22,24 284:1,15 285:23 286:2,21 291:10 291:14,15 292:12 292:20 293:9 295:22 299:4 301:23 302:16,25 303:2 306:2,9 307:7,17,22 310:24 315:11,16 316:13 319:8 322:4 325:2 339:13,21 340:15 344:4,10,11 350:2 359:14,18,20 374:20 375:4 380:15 382:2 383:2,8 386:19 416:16 417:13,18 417:22 418:2 431:13 452:7	unfortunately 161:11 uninformed 165:21 unit 48:18 52:15 52:17,23 62:6 63:13 64:4 65:6 89:8 148:3,13 166:15 169:25 203:19 448:12 454:3 united 1:1 239:7 240:23 241:5 359:11 369:19 370:5 446:2 447:9 units 434:12 unknown 406:12 unknowns 405:24 unlawful 56:5 unnecessary 304:4 304:11 305:15 unquote 254:24 unregulated 86:21 unreported 405:24 unscrupulous 428:20,23 429:2 unsophisticated 159:5 unsure 426:4 unused 172:17 244:9 update 234:5 updated 279:21 uptick 43:16,24 59:23 221:1,4,23 upticks 396:19	usable 44:4 use 43:17 58:9 71:3 72:19 96:19 140:22 143:2,3,7 151:8,13 157:10 162:5 164:4,14 165:1,4 167:23 172:10 185:10 193:10 210:19 216:15 234:16 236:1 243:2 247:5 260:21 281:7 283:17 287:17 289:14 290:8 293:16 301:16 302:15 306:24 308:22 309:18 317:11 318:3 320:5 325:23 328:14 329:3 330:5 331:17,25 332:11 333:3,16 333:22 334:3,5,7 334:14 335:8 383:25 384:10 390:7 392:25 407:1 419:9 420:23 423:3 429:16,25 430:13 432:23,25 433:3,3 445:8 user 97:2,8 399:10 410:3 users 7:15 73:13 88:14 150:17 156:4 414:10,11 uses 39:22 96:15 140:25 150:20
understandable 18:14	understands 425:25 426:3		
understanding 37:21 43:7 47:4 87:20 107:21 129:22 130:2 132:17,21 133:2 133:23 134:5 135:1 151:11 152:3,6 164:7 167:22 183:12 184:18 232:23	understood 24:1 141:4 285:18 287:5 407:18 408:14 426:7 434:14 438:23 442:20 undertaken 87:5 246:6 unemployable 251:6 unemployment 251:22 252:6,15 252:16,18		

[uses - way]

Page 81

163:23,25 164:3 210:6 260:20 utility 444:4,6,8 utilize 294:4 utilized 297:7 300:2 325:21	victim 106:10 196:6 238:3 395:20 victim's 55:4 victims 54:20 365:14 video 10:1 videographer 5:11 14:1 16:20 67:8 67:11 125:4,7 181:23 182:8 237:2,5 263:20 266:15 313:3,6 338:22,25 366:2,5 370:20,23 397:4,7 455:9,12 456:6 videotaped 1:16 7:3 22:4,7,13 vietnam 78:6 view 84:7 116:19 117:2,18 396:14 433:5 440:24 viewed 353:1 views 34:3 violated 364:5 violation 21:1 violence 53:3 209:5 violent 56:22 visit 298:7 364:16 visited 140:9 342:9 visits 95:11 139:16 vital 45:10,11 306:18 374:16,21 375:5,12,16 376:24 388:6 389:10 430:24 431:2 vividly 368:9,16	vocal 173:17 voice 256:7 voices 177:5 volume 195:11 w wacker 3:10 5:6 wage 252:25,25 wait 70:9 waiting 396:5 waived 460:19 waiving 129:3 326:17 walgreens 416:12 walk 103:17 159:14 wall 177:21 walmart 2:12 15:19 416:12 wand 261:2,7 262:6 wandered 80:9 want 22:16 36:10 36:14 37:7 40:19 52:3 58:20,22 74:15 84:22,22 87:21 90:7 115:7 119:18 125:11 126:14 127:5 135:13,14 156:5 159:2 163:21 168:16 183:19 185:17,24 192:11 226:7 235:4 243:19 247:7 249:6 253:15 256:8 277:13 301:2 322:18 345:15 347:3,16 348:8 361:18 366:17 367:22 374:2 375:22	379:10 383:25 393:14 401:9 402:7 404:3 405:25 413:23 415:12 421:1,2 422:5,7 423:18 435:12 443:1 445:3 wanted 58:15 75:5 110:9 137:7 157:21 175:18 176:8 183:22 197:8 198:13 296:18 347:18 348:4,5 371:10 418:24 wanting 30:16 wants 76:15 113:25 334:22 430:11 war 154:13 warehouse 133:17 warn 88:25 warning 88:25 290:8 361:25 370:5 warnings 369:22 warranted 175:9 warrants 438:14 washington 2:20 4:9 waste 249:15 water 172:14 348:11,20 waterloo 124:17 watson 3:14,14 5:3,4 wave 45:22 261:2 way 25:7 29:24 41:9 43:4 46:24 57:21 83:19 85:15
v v 1:11 460:6 461:3 462:3 valid 164:12 420:15 value 53:23 384:2 419:10 425:12,14 425:17,23 426:1,4 426:7 values 250:5 variety 44:5 63:4 200:18 240:7 349:15 449:14 various 243:17 424:17 436:16 vast 81:5 vehicle 256:3 vehicles 256:18,19 256:21 257:2 vein 284:24 veritext 14:12 16:22 460:1,7 463:1 veritext.com. 460:17 versed 40:5 453:12 version 22:21 129:16 versions 38:4 283:25,25 versus 180:6 188:3 247:21 286:12 vicodin 39:17 42:20 57:17			

94:21 96:17 101:6 102:20 109:24 110:13,24 113:21 115:15 124:12 129:2 132:17 135:10 144:7 153:13 154:2,15 154:23 156:19 157:11 171:12,20 172:16 179:5,17 181:4 205:4 213:15 232:7 242:24 252:11 255:8 256:9,23 304:17 306:20 310:6 333:9 338:8 342:16,18 345:13 346:11 352:15 364:12 392:5 393:20 394:20 400:24 418:18 432:9 443:25 446:2 447:9 451:6 ways 97:22 157:11 159:6 201:25 225:3 253:18 254:23 310:17 391:21 404:17 428:17 451:11 wc.com 2:21 we've 31:20 38:14 42:20 57:9 71:15 97:25 106:23 112:23 124:5 152:24 154:21,23 159:13 163:20,22 168:22,22 172:6 186:9 188:11 192:10,17 196:9 197:25 198:17 199:7 206:2	210:25 211:4 229:7 237:13 238:8,13 243:22 244:16 245:9 252:19 253:18 257:20 258:2,6,16 270:23 287:13 289:3 292:15 294:9 297:25 298:1,3 303:4,16 311:17,21 319:6 336:15 358:7 363:6 364:12 367:12 372:3 378:19 379:6 386:4 397:16 418:23 421:15 423:17 424:6 442:19 445:23 weathered 253:17 website 444:18,21 weeds 219:23 week 268:12 279:23 281:14 288:5 weekend 268:13 weekends 32:3 weeks 28:3 32:15 32:19,25 weeping 193:23 weight 380:19,23 384:1 390:9 412:5 welcome 389:6 wellness 236:18 wendy 3:16 16:3 183:6 266:21 wendy.feinstein 3:18 went 71:8 105:16 120:22 134:20 138:8,11,21,22	140:24 147:4 151:7 153:13 174:1 181:7 225:11 232:22 246:16 266:22 267:5 277:1 286:22 396:2 436:25 450:23 west 3:10,16 5:6 16:3 266:21 westbrook 2:5 whawkins 2:21 whereof 459:5 whispering 14:4 who've 308:10 wide 73:21 449:14 widely 143:4 wider 44:4 williams 2:19 15:21 willing 159:3 160:12 wilms 26:5 372:17 372:21 381:18 437:10,11 438:7 win 393:17 window 318:19 winner 4:4 6:8 16:8,8,18 17:5 22:2,12 23:13,17 23:22 24:1 29:6 47:19 60:25 61:19 67:7,13 87:19,25 88:8 110:4 117:22 125:2,17,19,21 128:4 136:2 145:17 168:18 181:22 182:10,14 183:3,9,14,21,24 187:1 190:6,11,15 190:19 191:18	194:20 226:10,17 236:24 237:8 238:23 240:1,3 255:20,23 256:6 256:10 263:15 267:5 428:5 wish 35:16,16 176:10 wishes 30:25 withdraw 145:17 withdrawal 84:22 witness 2:3 14:24 15:10,14 16:22 24:2 36:12 182:22 190:10,13 191:20 204:5 225:24 237:1 263:19 280:9 298:2,2,11 313:2 322:15 323:2 324:1,18 338:24 339:2,4 343:10 345:22 348:8,10,13 371:9 389:1 398:5 426:22 429:21 456:2,5 458:9,14 458:15,18 459:5 460:8,11 461:1,4 461:11 462:1,4,15 witness's 457:2 witnessed 352:12 witnesses 226:13 witness' 460:14 woman 104:4 358:18 wonder 63:10 word 44:25 72:19 201:15 221:15 318:3,5,8,9 340:23 346:7 392:25 420:23,24 423:3
---	--	---	--

425:14,23 426:1,4 426:8,11 429:15 429:16,25 430:7 430:13 432:23,25 437:7 449:19 words 30:12 66:20 151:10 368:15 372:12 419:9,10 425:24 433:9 work 26:25 31:19 34:1 49:25 94:2 107:24 115:24 116:10 149:9,18 150:10,19 151:3,9 152:22 169:5,24 170:4 196:10 212:11 227:19 252:24 298:3,4,18 299:3 333:11 393:13,13,14,15 393:20 394:17 400:2,18 410:25 413:15 422:24 workday 32:2,5 worked 103:15 107:15 152:25 166:24 171:22 215:17,19 workforce 250:10 250:18,23 252:10 252:13 working 174:22 190:17 195:23 203:14,18 214:11 214:12 239:6,7 250:3 254:18 438:6 445:5,12 447:10,25 works 149:10 150:11,12 165:20 166:13,14 303:12	world 2:14 94:2 423:20 worry 38:8 worse 153:25,25 wraparound 231:4 write 46:15 133:7 184:11,14 187:6 384:9 writes 99:7 132:16 287:11 writing 100:22 110:15,22 113:17 144:9 248:10 359:25 370:11 428:3 written 100:7 114:12 132:12,22 135:8,17 165:2,11 183:13,18 273:3 273:23 274:2 304:23 308:16,18 311:2 312:4 326:21 340:12 341:4,11,21,23 342:13 wrong 105:14 110:25 122:5 123:1 124:2 132:9 236:6 335:10 416:18 443:19 wrongdoing 119:15 122:12,12 127:3 128:2 273:6 304:24 326:23 333:5,23 334:1,15 334:23 wrongful 119:4 363:19 wrote 50:22 54:2,3 109:5,14 110:1,12	110:12 130:6 131:13 133:20 305:1 428:13 453:17 x xanax 39:7 98:22 xartemis 315:5 xr 315:6 y yeah 23:21 29:10 32:18 36:24 37:24 87:2,21 88:3 98:6 106:8 109:2 110:19 124:16 137:3 148:6,17 151:4 153:12 155:9 168:13 175:18 181:13 182:25 183:9,11 208:8 216:21 218:23 221:18 228:21 236:2,4 238:7 244:4 245:12 248:23 256:9,10 262:12 278:11 282:14 290:20 298:6,22 311:8,13 318:3 335:12,12,23 336:11 339:4 342:4,7 345:3 346:12 347:7,15 347:19 348:12,17 357:24 389:2 400:6 402:11 404:5 421:22 442:24 443:13 453:1 year 49:12 68:23 94:19 111:20,23	115:22 146:10 148:1,10 161:20 196:22 213:18 222:21 223:14,14 244:14 259:12 278:9 334:12 394:13 years 20:5,14,20 20:21 25:5 30:24 49:23 51:23 59:14 71:21 72:1 73:1 80:17 90:15 91:14 92:2 137:19 145:22 177:18 186:9 223:14,18 224:16 225:16 246:15 253:14,20 349:18 405:16 408:6 413:16 yellow 379:4 yep 178:5 183:13 347:24 youngstown 21:22 youth 198:8 z zach 15:23 zachary 3:4 zachary.adams 3:6 zero 66:22 zip 175:1 zone 290:15 307:11 zoo 91:23
--	---	---	---

Federal Rules of Civil Procedure

Rule 30

(e) Review By the Witness; Changes.

(1) Review; Statement of Changes. On request by the deponent or a party before the deposition is completed, the deponent must be allowed 30 days after being notified by the officer that the transcript or recording is available in which:

(A) to review the transcript or recording; and

(B) if there are changes in form or substance, to sign a statement listing the changes and the reasons for making them.

(2) Changes Indicated in the Officer's Certificate. The officer must note in the certificate prescribed by Rule 30(f)(1) whether a review was requested and, if so, must attach any changes the deponent makes during the 30-day period.

DISCLAIMER: THE FOREGOING FEDERAL PROCEDURE RULES ARE PROVIDED FOR INFORMATIONAL PURPOSES ONLY.

THE ABOVE RULES ARE CURRENT AS OF SEPTEMBER 1, 2016. PLEASE REFER TO THE APPLICABLE FEDERAL RULES OF CIVIL PROCEDURE FOR UP-TO-DATE INFORMATION.

VERITEXT LEGAL SOLUTIONS
COMPANY CERTIFICATE AND DISCLOSURE STATEMENT

Veritext Legal Solutions represents that the foregoing transcript is a true, correct and complete transcript of the colloquies, questions and answers as submitted by the court reporter. Veritext Legal Solutions further represents that the attached exhibits, if any, are true, correct and complete documents as submitted by the court reporter and/or attorneys in relation to this deposition and that the documents were processed in accordance with our litigation support and production standards.

Veritext Legal Solutions is committed to maintaining the confidentiality of client and witness information, in accordance with the regulations promulgated under the Health Insurance Portability and Accountability Act (HIPAA), as amended with respect to protected health information and the Gramm-Leach-Bliley Act, as amended, with respect to Personally Identifiable Information (PII). Physical transcripts and exhibits are managed under strict facility and personnel access controls. Electronic files of documents are stored in encrypted form and are transmitted in an encrypted fashion to authenticated parties who are permitted to access the material. Our data is hosted in a Tier 4 SSAE 16 certified facility.

Veritext Legal Solutions complies with all federal and State regulations with respect to the provision of court reporting services, and maintains its neutrality and independence regardless of relationship or the financial outcome of any litigation. Veritext requires adherence to the foregoing professional and ethical standards from all of its subcontractors in their independent contractor agreements.

Inquiries about Veritext Legal Solutions' confidentiality and security policies and practices should be directed to Veritext's Client Services Associates indicated on the cover of this document or at www.veritext.com.